State: District of Columbia Filing Company: Kaiser Foundation Health Plan of the Mid-Atlantic

States, Inc.

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only

- НМО

Product Name: 2016 DC Small Group

Project Name/Number: / Filing at a Glance

Company: Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

Product Name: 2016 DC Small Group State: District of Columbia

TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)

Sub-TOI: HOrg02G.004F Small Group Only - HMO

Filing Type: Rate

Date Submitted: 05/01/2015

SERFF Tr Num: KPMA-130060631

SERFF Status: Assigned

State Tr Num: State Status: Co Tr Num:

Implementation 01/01/2016

Date Requested:

Author(s): Stephen Chuang

Reviewer(s): John Morgan (primary), Damon Siler

Disposition Date:
Disposition Status:
Implementation Date:

State Filing Description:

State: District of Columbia Filing Company: Kaiser Foundation Health Plan of the Mid-Atlantic

States, Inc.

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only

НМО

Product Name: 2016 DC Small Group

Project Name/Number: /

General Information

Project Name: Status of Filing in Domicile: Not Filed

Project Number: Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:

Explanation for Combination/Other: Market Type: Group

Submission Type: New Submission Group Market Size: Small
Group Market Type: Overall Rate Impact: -4.9%

Filing Status Changed: 05/04/2015

State Status Changed: Deemer Date:

Created By: Stephen Chuang Submitted By: Stephen Chuang

Corresponding Filing Tracking Number:

PPACA: Not PPACA-Related

PPACA Notes: null

Include Exchange Intentions: No

Filing Description:

This is the 2016 Small Group rate filing for plans offered on exchange.

Company and Contact

Filing Contact Information

Catherine Reifert, Manager catherine.l.reifert@kp.org 2101 E. Jefferson 301-816-7346 [Phone] Rockville, MD 20852 301-816-7346 [FAX]

Filing Company Information

Kaiser Foundation Health Plan of CoCode: 95639 State of Domicile: Maryland the Mid-Atlantic States, Inc. Group Code: Company Type: Health 2101 E Jefferson St. Group Name: Maintenance Organization

Rockville, MD 20852 FEIN Number: 52-0954463 State ID Number:

(301) 816-6867 ext. [Phone]

Filing Fees

Fee Required? No Retaliatory? No

Fee Explanation:

State: District of Columbia Filing Company: Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO

Product Name: 2016 DC Small Group

Project Name/Number: /

Rate Information

Rate data applies to filing.

Filing Method:

Rate Change Type: %

Overall Percentage of Last Rate Revision: %

Effective Date of Last Rate Revision:

Filing Method of Last Filing:

Company Rate Information

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Premium for	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.	Decrease	-4.900%	2.200%	\$350,243	1,658	\$15,920,146	7.100%	-6.400%

State: District of Columbia Filing Company: Kaiser Foundation Health Plan of the Mid-Atlantic

States, Inc.

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only

НМО

Product Name: 2016 DC Small Group

Project Name/Number:

Rate Review Detail

COMPANY:

Company Name: Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

HHS Issuer Id: 94506

PRODUCTS:

Product Name	HIOS Product ID	HIOS Submission ID	Number of Covered Lives
DC Small Group	94506DC035, 94506DC036		2856

Trend Factors:

FORMS:

New Policy Forms:

DC-SG-HMO-FACE(01-14)HIX, DC-SG-POS-FACE(01-14)HIX, EOC-COVER (1-05), DC-SG-WRAP(01-16)HIX, KFHP-EOC COVER (01/10)DC, DCLG-ALL-TOC(1-05), DC-SG-SEC1(01-16)HIX, DC-SG-SEC2(01-15)HIX, DC-SG-SEC3(01-16)HIX, DC-SG-SEC4(01-14)HIX, DC-SG-SEC5(01-16)HIX, DC-SG-SEC6(01-15)HIX, DC-SG-SEC7(01-14)HIX, DC-SG-APPX-DEF(01-16)HIX, DC-SG-PLATINUM-0-20-DENTAL-HMO-COST(01-16)HIX, DC-SG-GOLD-0-20-DENTAL-HMO-COST(01-16)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-COST(01-16)HIX, DC-SG-GOLD-500-20-DENTAL-DHMO-COST(01-16)HIX, DC-SG-GOLD-1000-30-DENTAL-DHMO-COST(01-16)HIX, DC-SG-SILVER-1250-35-DENTAL-DHMO-COST(01-16)HIX, DC-SG-SILVER-2000-35-DENTAL-DHMO-COST(01-16)HIX, DC-SG-BRONZE-4500-50-DENTAL-DHMO-COST(01-16)HIX, DC-SG-GOLD-1350-0%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-GOLD-1500-10-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-SILVER-1500-30-20%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-SILVER-2500-30-10%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-BRONZE-5000-20%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-BRONZE-5000-20-30%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-BRONZE-6000-30-10%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-BRONZE-4500-50-POS-DENTAL-COST(01-16)HIX, DC-SG-GOLD-1000-30-POS-DENTAL-COST(01-16)HIX, DC-SG-SILVER-2000-35-POS-DENTAL-COST(01-16)HIX, DC-SG-PLATINUM-0-20-DENTAL-HMO-RX(01-16)HIX, DC-SG-GOLD-0-20-DENTAL-HMO-RX(01-16)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-RX(01-16)HIX, DC-SG-GOLD-500-20-DENTAL-DHMO-RX(01-16)HIX, DC-SG-GOLD-1000-30-DENTAL-DHMO-RX(01-16)HIX, DC-SG-SILVER-1250-35-DENTAL-DHMO-RX(01-16)HIX, DC-SG-SILVER-2000-35-DENTAL-DHMO-RX(01-16)HIX, DC-SG-BRONZE-4500-50-DENTAL-DHMO-RX(01-16)HIX, DC-SG-GOLD-1350-0%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-GOLD-1500-10-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-SILVER-1500-30-20%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-SILVER-2500-30-10%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-BRONZE-5000-20%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-BRONZE-5000-20-30%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-BRONZE-6000-30-10%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-BRONZE-4500-50-POS-DENTAL-RX(01-16)HIX

Affected Forms:

State: District of Columbia Filing Company: Kaiser Foundation Health Plan of the Mid-Atlantic

States, Inc.

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only

· HMO

Product Name: 2016 DC Small Group

Project Name/Number: / Other Affected Forms:

REQUESTED RATE CHANGE INFORMATION:

Change Period: Quarterly
Member Months: 34,232
Benefit Change: Increase

Percent Change Requested: Min: -6.4 Max: 7.1 Avg: 2.2

PRIOR RATE:

Total Earned Premium: 15,920,146.00 Total Incurred Claims: 12,826,862.00

Annual \$: Min: 145.66 Max: 974.82 Avg: 716.37

REQUESTED RATE:

Projected Earned Premium: 16,270,389.00 Projected Incurred Claims: 13,109,053.00

Annual \$: Min: 148.86 Max: 996.27 Avg: 732.13

State: District of Columbia Filing Company: Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO

Product Name: 2016 DC Small Group

Project Name/Number: /

Rate/Rule Schedule

State: District of Columbia Filing Company: Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO

Product Name: 2016 DC Small Group

Project Name/Number:

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		2016 DC Small Group Exchange Rate Sheets	DC-SG-HMO-FACE(01-14)HIX, DC-SG-POS-FACE(01-14)HIX, EOC-COVER (1-05), DC-SG-WRAP(01-16)HIX, KFHP-EOCCOVER (01/10)DC, DCLG-ALL-TOC(1-05), DC-SG-SEC1(01-16)HIX, DC-SG-SEC3(01-15)HIX, DC-SG-SEC3(01-16)HIX, DC-SG-SEC3(01-16)HIX, DC-SG-SEC5(01-16)HIX, DC-SG-SEC6(01-15)HIX, DC-SG-SEC7(01-14)HIX, DC-SG-SEC7(01-14)HIX, DC-SG-SEC7(01-14)HIX, DC-SG-PLATINUM-0-20-DENTAL-HMO-COST(01-16)HIX, DC-SG-GOLD-0-20-DENTAL-DHMO-COST(01-16)HIX, DC-SG-GOLD-500-20-DENTAL-DHMO-COST(01-16)HIX, DC-SG-GOLD-1000-30-DENTAL-DHMO-COST(01-16)HIX, DC-SG-SILVER-1250-35-DENTAL-DHMO-COST(01-16)HIX, DC-SG-SILVER-2000-35-DENTAL-DHMO-COST(01-16)HIX, DC-SG-SILVER-2000-35-DENTAL-DHMO-COST(01-16)HIX, DC-SG-GOLD-1500-10-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-GOLD-1500-10-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-GOLD-1500-10-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-SILVER-2500-30-10%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-SILVER-2500-30-10%-HSA-D		Previous State Filing Number: KPMA-129593007 Percent Rate Change Request:	2016 DC Small Group Exchange Rate Sheets.pdf,

State: District of Columbia Filing Company: Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO

Product Name: 2016 DC Small Group

Project Name/Number:

BRONZE-5000-20%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-BRONZE-5000-20-30%-HSA-DENTAL-HDHP-COST(01-16)HIX. DC-SG-BRONZE-6000-30-10%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-BRONZE-4500-50-POS-DENTAL-COST(01-16)HIX, DC-SG-GOLD-1000-30-POS-DENTAL-COST(01-16)HIX, DC-SG-SILVER-2000-35-POS-DENTAL-COST(01-16)HIX, DC-SG-PLATINUM-0-20-DENTAL-HMO-RX(01-16)HIX, DC-SG-GOLD-0-20-DENTAL-HMO-RX(01-16)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-RX(01-16)HIX, DC-SG-GOLD-500-20-DENTAL-DHMO-RX(01-16)HIX, DC-SG-GOLD-1000-30-DENTAL-DHMO-RX(01-16)HIX, DC-SG-SILVER-1250-35-DENTAL-DHMO-RX(01-16)HIX, DC-SG-SILVER-2000-35-DENTAL-DHMO-RX(01-16)HIX, DC-SG-BRONZE-4500-50-DENTAL-DHMO-RX(01-16)HIX, DC-SG-GOLD-1350-0%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-GOLD-1500-10-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-SILVER-1500-30-20%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-SILVER-2500-30-10%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-BRONZE-5000-20%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-BRONZE-5000-20-30%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-BRONZE-6000-30-10%-HSA-DENTAL-HDHP-RX(01SERFF Tracking #: State Tracking #: Company Tracking #: KPMA-130060631 Filing Company: State: District of Columbia Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO Product Name: 2016 DC Small Group Project Name/Number: 16)HIX, DC-SG-BRONZE-4500-50-POS-DENTAL-RX(01-16)HIX

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective January 1, 2016 District of Columbia Small Group Exchange Appendix 1-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age		tal KP DC Platinum 500/20/Dental/Ped Dental	KP DC Gold 0/20/Dental Ped Dental	CP DC Gold 500/20/Dental/Ped De	nt KP DC Gold 1000/30/Dental/Ped Den	tal KP DC Gold 1350/0%/HSA/Dental Ped Dental			KP DC Silver 2000/35/Dental/Ped D			KP DC Bronze 4500/50/Dental/Ped Dental	KP DC Brouze 6600/30/10%/HSA/Dental/Ped Dental	KP DC Bronze 5000/20%/ISA/Dental/Ped Dent		DC Broom 4500/50/POS/Dontal/Ped De		KP DC Gold 1000/30/POS/Dental/Ped Dental
20 and Under	\$277.57	\$267.33	\$254.26	\$252.82	\$231.86	\$227.61	\$217.24	\$210.02	\$197.43	\$197.36	\$183.34	\$162.91	\$150.42	\$153.16	\$152.72	\$183.97	\$222.54	\$268.88
21	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
22	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
23	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
24	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
25	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
26	\$308.55 \$308.55	\$297.17 \$297.17	\$282.64 \$282.64	\$281.04 \$281.04	\$257.74 \$257.74	\$253.01 \$253.01	\$241.49 \$241.49	\$233.46 \$233.46	\$219.46 \$219.46	\$219.39 \$219.39	\$203.81 \$203.81	\$181.10 \$181.10	\$167.21 \$167.21	\$170.26 \$170.26	\$169.77 \$169.77	\$204.51 \$204.51	\$247.38 \$247.38	\$298.89 \$298.89
27	\$308.55	\$304.12	\$282.04 \$289.25	\$281.04 \$287.61	\$257.74	\$253.01 \$258.93	\$241.49 \$247.14	\$233.46 \$238.92	\$219.46 \$224.59	\$219.39 \$224.52	\$203.81 \$208.57	\$181.10	\$167.21 \$171.12	\$170.26	\$173.74	\$204.51 \$209.29	\$247.38 \$253.16	\$298.89 \$305.88
28	\$313.77	\$310.66	\$289.25 \$795.47	\$287.01	\$263.77	\$258.93 \$264.50	\$247.14 \$252.45	\$238.92	\$224.59 \$229.42	\$224.52 \$229.35	\$208.57 \$213.06	\$183.33 \$189.32	\$171.12 \$174.80	\$174.24	\$173.74 \$177.48	\$209.29	\$253.16 \$258.61	\$305.88 \$312.46
29	\$330.62	\$318.43	\$293.47 \$302.85	\$301.14	\$276.18	\$271.11	\$252.45 \$258.76	\$250.16	\$235.16	\$235.08	\$218.38	\$194.05	\$179.17	\$182.43	\$181.92	\$219.14	\$265.07	\$312.40 \$320.27
30	\$330.02	\$318.43 \$326.60	\$310.63	\$301.14	\$270.18	\$271.11	\$258.76 \$265.40	\$250.16	\$233.10 \$241.20	\$235.08 \$241.11	\$218.38 \$223.99	\$194.05	\$179.17 \$183.77	\$182.43 \$187.12	\$181.92 \$186.59	\$219.14 \$224.76	\$265.07 \$271.88	\$320.27 \$328.49
31	\$346.75	\$333.96	\$317.63	\$315.83	\$289.65	\$284.34	\$203.40 \$271.38	\$262.37	\$241.20	\$246.55	\$229.04	\$203.52	\$183.77	\$191.33	\$190.39	\$229.83	\$278.00	\$328.49 \$335.89
32	\$354.81	\$333.90 \$341.73	\$317.03 \$325.01	\$323.18	\$296.39	\$290.95	\$271.38 \$277.70	\$268.47	\$252.37	\$252.28	\$234.36	\$203.32 \$208.25	\$197.71	\$191.33	\$190.79	\$235.17	\$284.47	\$343.70
34	\$363.30	\$349.90	\$332.79	\$330.91	\$303.48	\$297.91	\$284.34	\$274.89	\$258.40	\$258.32	\$239.97	\$213.23	\$196.88	\$200.47	\$199.00	\$240.80	\$291.27	\$351.92
35	\$371.79	\$358.08	\$340.56	\$338.64	\$310.57	\$304.87	\$290.98	\$281.31	\$264.44	\$264.35	\$245.58	\$218.21	\$201.48	\$205.47	\$204.57	\$246.42	\$298.08	\$360.15
36	\$380.28	\$366.25	\$348.34	\$346.37	\$317.66	\$311.83	\$297.63	\$287.74	\$270.48	\$270.39	\$251.18	\$223.20	\$206.07	\$209.83	\$209.24	\$252.05	\$304.88	\$368.37
37	\$388.77	\$374.43	\$356.12	\$354.10	\$324.75	\$318.79	\$304.27	\$294.16	\$276.52	\$276.42	\$256.79	\$228.18	\$210.67	\$214.52	\$213.91	\$257.68	\$311.69	\$376.59
38	\$393.43	\$378.92	\$360.39	\$358.35	\$328.65	\$322.62	\$307.92	\$797.69	\$279.84	\$279.74	\$259.87	\$230.92	\$213.20	\$217.09	\$216.48	\$260.77	\$315.43	\$381.11
30	\$398.10	\$383.42	\$364.67	\$362.61	\$332.55	\$326.45	\$311.58	\$301.22	\$283.16	\$283.06	\$262.96	\$233.66	\$215.73	\$219.67	\$219.05	\$263.87	\$319.17	\$385.64
40	\$413.81	\$398.54	\$379.05	\$376.91	\$345.67	\$339.33	\$323.87	\$313.10	\$294.33	\$294.23	\$273.33	\$242.88	\$224.24	\$228.33	\$227.69	\$274.27	\$331.76	\$400.85
41	\$429.93	\$414.08	\$393.83	\$391.60	\$359.14	\$352.55	\$336.49	\$325.31	\$305.80	\$305.69	\$283.98	\$252.34	\$232.98	\$237.23	\$236.56	\$284.96	\$344.69	\$416.47
42	\$446.91	\$430.43	\$409.38	\$407.06	\$373.32	\$366.47	\$349.78	\$338.15	\$317.87	\$317.76	\$295.20	\$262.31	\$242.18	\$246.60	\$245.90	\$296.22	\$358.30	\$432.91
43	\$464.31	\$447.19	\$425.32	\$422.91	\$387.85	\$380.74	\$363.40	\$351.32	\$330.25	\$330.14	\$306.69	\$272.52	\$251.61	\$256.20	\$255.48	\$307.75	\$372.26	\$449.77
44	\$482.56	\$464.76	\$442.03	\$439.54	\$403.10	\$395.71	\$377.68	\$365.13	\$343.23	\$343.11	\$318.74	\$283.23	\$261.50	\$266.27	\$265.52	\$319.85	\$386.89	\$467.45
45	\$501.24	\$482.75	\$459.14	\$456.54	\$418.70	\$411.02	\$392.29	\$379.26	\$356.51	\$356.39	\$331.08	\$294.19	\$271.62	\$276.58	\$275.79	\$332.22	\$401.86	\$485.54
46	\$520.76	\$501.55	\$477.02	\$474.33	\$435.01	\$427.03	\$407.57	\$394.03	\$370.40	\$370.27	\$343.98	\$305.65	\$282.20	\$287.35	\$286.53	\$345.16	\$417.51	\$504.45
47	\$541.13	\$521.17	\$495.68	\$492.88	\$452.02	\$443.73	\$423.52	\$409.44	\$384.89	\$384.76	\$357.43	\$317.61	\$293.24	\$298.59	\$297.74	\$358.67	\$433.84	\$524.18
48	\$562.35	\$541.61	\$515.12	\$512.21	\$469.75	\$461.13	\$440.13	\$425.50	\$399.98	\$399.85	\$371.45	\$330.06	\$304.74	\$310.30	\$309.42	\$372.73	\$450.86	\$544.74
49	\$584.42	\$562.87	\$535.34	\$532.31	\$488.19	\$479.23	\$457.40	\$442.20	\$415.68	\$415.54	\$386.03	\$343.01	\$316.70	\$322.48	\$321.56	\$387.36	\$468.55	\$566.12
50	\$607.34	\$584.94	\$556.33	\$553.19	\$507.33	\$498.02	\$475.34	\$459.54	\$431.98	\$431.83	\$401.16	\$356.47	\$329.12	\$335.12	\$334.17	\$402.55	\$486.93	\$588.32
51	\$631.11	\$607.83	\$578.10	\$574.84	\$527.18	\$517.51	\$493.94	\$477.53	\$448.89	\$448.73	\$416.86	\$370.42	\$342.00	\$348.24	\$347.25	\$418.30	\$505.98	\$611.34
52	\$655.72	\$631.54	\$600.65	\$597.26	\$547.75	\$537.70	\$513.20	\$496.15	\$466.40	\$466.24	\$433.12	\$384.86	\$355.34	\$361.82	\$360.79	\$434.62	\$525.72	\$635.19
53	\$681.19	\$656.07	\$623.98	\$620.45	\$569.02	\$558.58	\$533.13	\$515.42	\$484.51	\$484.34	\$449.94	\$399.81	\$369.14	\$375.87	\$374.81	\$451.50	\$546.13	\$659.86
54	\$707.93	\$681.82	\$648.47	\$644.81	\$591.35	\$580.51	\$554.06	\$535.65	\$503.53	\$503.35	\$467.60	\$415.50	\$383.63	\$390.63	\$389.52	\$469.22	\$567.57	\$685.76
55	\$735.51	\$708.39	\$673.74	\$669.93	\$614.40	\$603.13	\$575.65	\$556.52	\$523.15	\$522.97	\$485.83	\$431.70	\$398.58	\$405.85	\$404.70	\$487.50	\$589.69	\$712.48
56	\$764.37	\$736.18	\$700.18	\$696.22	\$638.51	\$626.79	\$598.24	\$578.36	\$543.67	\$543.49	\$504.89	\$448.63	\$414.22	\$421.77	\$420.58	\$506.63	\$612.83	\$740.44
57	\$794.08	\$764.80	\$727.39	\$723.28	\$663.32	\$651.16	\$621.49	\$600.84	\$564.81	\$564.61	\$524.51	\$466.07	\$430.32	\$438.17	\$436.92	\$526.32	\$636.65	\$769.22
58	\$825.07	\$794.64	\$755.77	\$751.50	\$689.20	\$676.56	\$645.74	\$624.28	\$586.84	\$586.64	\$544.98	\$484.26	\$447.11	\$455.26	\$453.97	\$546.86	\$661.49	\$799.23
59	\$857.32	\$825.70	\$785.32	\$780.88	\$716.15	\$703.01	\$670.99	\$648.69	\$609.79	\$609.58	\$566.28	\$503.19	\$464.59	\$473.06	\$471.72	\$568.24	\$687.35	\$830.47
60	\$890.85	\$858.00	\$816.03	\$811.42	\$744.16	\$730.51	\$697.23	\$674.06	\$633.63	\$633.42	\$588.43	\$522.87	\$482.76	\$491.56	\$490.17	\$590.46	\$714.23	\$862.95
61	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66
62	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66
63	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66
64+	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66

Rates effective January 1, 2016 District of Columbia Small Group Exchange Appendix I-B

19 20 22 23 21 24 Gold Platinum Gold Gold Gold Platinum Age KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel KP DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$291.45 \$280.70 \$266.97 \$265.46 \$243.46 \$238.99 \$295.09 \$323.98 \$312.03 \$296.77 \$270.63 \$265.67 21 22 \$323.98 \$312.03 \$296.77 \$295.09 \$270.63 \$265.67 23 \$323.98 \$312.03 \$296,77 \$295.09 \$270.63 \$265.67 \$323.98 \$270.63 24 \$312.03 \$296.77 \$295.09 \$265.67 25 \$323.98 \$312.03 \$296.77 \$295.09 \$270.63 \$265.67 26 \$323.98 \$312.03 \$296,77 \$295.09 \$270.63 \$265.67 27 \$323.98 \$312.03 \$296.77 \$295.09 \$270.63 \$265.67 \$301.99 28 \$331.55 \$319.33 \$303.71 \$276.96 \$271.88 \$338.68 \$326.19 \$310.24 \$308.49 \$282.91 \$277.72 29 \$347.15 \$334.35 \$318.00 \$316.20 \$289.99 \$284.67 30 \$342.93 \$326.16 \$324.32 \$297.43 31 \$356.06 \$291.98 \$364.09 \$350.66 \$333.51 \$331.62 \$304.13 \$298.55 32 33 \$372.55 \$358.81 \$341.26 \$339.33 \$311.21 \$305.50 34 \$381.47 \$367.40 \$349.43 \$347.45 \$318.65 \$312.81 \$390.38 \$375.98 \$357.59 \$355.57 \$326.10 35 \$320.11 36 \$399.29 \$384.57 \$365.76 \$363.69 \$333.54 \$327.42 37 \$408.20 \$393.15 \$373.92 \$371.81 \$340.99 \$334.73 38 \$413.11 \$397.87 \$378.41 \$376.27 \$345.08 \$338.75 39 \$418.01 \$402.59 \$382.90 \$380.74 \$349.18 \$342.77 40 \$434.50 \$418.47 \$398.01 \$395.76 \$362.95 \$356.29 \$451.43 \$434.78 \$413.52 \$411.18 \$377.09 41 \$370.18 42 \$469.26 \$451.95 \$429.85 \$427.42 \$391.98 \$384.79 \$487.53 \$446.58 \$407.25 43 \$469.55 \$444.06 \$399.78 44 \$506.69 \$488.00 \$464.14 \$461.51 \$423.25 \$415.49 \$482.10 \$479.37 \$439.63 45 \$526.30 \$506.89 \$431.57 \$526.63 \$500.87 \$498.04 \$456.76 46 \$546.80 \$448.38 \$568.19 \$547.23 \$520.47 \$517.53 \$474.63 \$465.92 47 \$590.47 \$568.69 \$540.88 \$537.82 \$493.24 48 \$484.19 \$562.11 \$558.93 \$512.60 \$503.19 49 \$613.64 \$591.01 50 \$637.71 \$614.19 \$584.15 \$580.85 \$532.70 \$522.93 51 \$662.66 \$638.22 \$607.01 \$603.58 \$553.54 \$543.39 52 \$688.51 \$663.12 \$630.69 \$627.12 \$575.13 \$564.58 53 \$715.25 \$688.87 \$655.18 \$651.47 \$597.47 \$586.51 54 \$743.32 \$715.91 \$680.90 \$677.05 \$620.92 \$609.53 55 \$772.29 \$743.81 \$707.43 \$703.43 \$645.12 \$633.28 56 \$802.59 \$772.99 \$735.19 \$731.03 \$670.43 \$658.13 57 \$833.79 \$803.04 \$763.76 \$759.44 \$696.49 \$683.71 \$793.56 \$789.08 \$723.66 58 \$866.32 \$834.37 \$710.39 59 \$900.19 \$866.99 \$824.59 \$819.92 \$751.96 \$738.16 60 \$935.39 \$900.90 \$856.83 \$851.99 \$781.36 \$767.03 \$971.94 \$936.09 \$890.31 \$885.27 \$811.89 \$797.00 61 \$885.27 62 \$971.94 \$936.09 \$890.31 \$811.89 \$797.00 \$885.27 63 \$971.94 \$936.09 \$890.31 \$811.89 \$797.00 \$971.94 \$890.31 \$885.27 \$811.89 64+ \$936.09 \$797.00

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective April 1, 2016 District of Columbia Small Group Exchange Appendix II-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	P DC Platinum 0/20/Dental/Ped Den P	P DC Platinum 500/20/Dental Ped Den	KP DC Gold @2@Dental/Ped Dental	DC Gold 500/20/Dental/Ped D	P DC Gold 1000/30/Dental/Ped D	en P DC Gold 1350/0%/HSA/Dental/Per	d Den KP DC Gold 1500/10/HSA/Dental/Ped Dental	P DC Silver 1250/35/Dental/Ped De	mP DC Silver 2000/35/Dental/Ped Den	P DC Silver 1500/30/HSA/Dental/Ped Den	KP DC Silver 2500/30/10%/HSA/Dental/Ped Dent	P DC Bronze 4500/50/Dental/Ped De	DC Bronze 6000/30/10%/HSA/Dental/Ped	De P DC Bronze 5000/20%/HSA/Dental/Ped I	es P DC Bronze 5000/20/HSA/Dental/Ped Der	CP DC Bronze 4500/50/POS/Dental/Ped Dent	KP DC Silver 2000/35/POS/Dental/Ped Dental	KP DC Gold 1000/30/POS/Dental/Ped Dental
20 and Under	\$279.95	\$269.63	\$256.44	\$254.99	\$233.85	\$229.57	\$219.11	\$211.82	\$199.13	\$199.06	\$184.91	\$164.31	\$151.71	\$154.48	\$154.03	\$185.55	\$224.45	\$271.19
21	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
22	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
23	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
24	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
25	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
26	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
27	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
28	\$318.48	\$306.73	\$291.73	\$290.08	\$266.04	\$261.15	\$249.26	\$240.97	\$226.52	\$226.45	\$210.36	\$186.92	\$172.59	\$175.74	\$175.23	\$211.09	\$255.33	\$308.51
29	\$325.33	\$313.33	\$298.01	\$296.32	\$271.75	\$266.77	\$254.62	\$246.16	\$231.39	\$231.32	\$214.89	\$190.95	\$176.30	\$179.51	\$179.00	\$215.63	\$260.83	\$315.14
30	\$333.46	\$321.17	\$305.45	\$303.73	\$278.55	\$273.44	\$260.98	\$252.31	\$237.18	\$237.10	\$220.26	\$195.72	\$180.71	\$184.00	\$183.48	\$221.02	\$267.35	\$323.02
31	\$342.02	\$329.41	\$313.30	\$311.52	\$285.70	\$280.46	\$267.68	\$258.79	\$243.27	\$243.18	\$225.91	\$200.74	\$185.35	\$188.73	\$188.19	\$226.69	\$274.22	\$331.31
32	\$349.73	\$336.83	\$320.36	\$318.54	\$292.14	\$286.78	\$273.71	\$264.62	\$248.75	\$248.67	\$231.01	\$205.27	\$189.52	\$192.97	\$192.43	\$231.80	\$280.39	\$338.78
33	\$357.86	\$344.67	\$327.80	\$325.96	\$298.94	\$293.45	\$280.09	\$270.78	\$254.54	\$254.45	\$236.37	\$210.04	\$193.93	\$197.46	\$196.91	\$237.19	\$286.91	\$346.65
34	\$366.42	\$352.91	\$335.65	\$333.75	\$306.09	\$300.47	\$286.78	\$277.25	\$260.62	\$260.54	\$242.03	\$215.06	\$198.57	\$202.19	\$201.62	\$242.87	\$293.77	\$354.94
35	\$374.98	\$361.16	\$343.49	\$341.55	\$313.24	\$307.49	\$293.48	\$283.73	\$266.71	\$266.62	\$247.69	\$220.08	\$203.21	\$206.91	\$206.33	\$248.54	\$300.64	\$363.24
36	\$383.55	\$369.40	\$351.33	\$349.35	\$320.39	\$314.51	\$300.19	\$290.21	\$272.80	\$272.71	\$253.34	\$225.12	\$207.84	\$211.63	\$211.04	\$254.22	\$307.50	\$371.53
37	\$392.11	\$377.65	\$359.18	\$357.14	\$327.54	\$321.53	\$306.88	\$296.69	\$278.90	\$278.79	\$259.00	\$230.14	\$212.48	\$216.36	\$215.75	\$259.89	\$314.37	\$379.82
38	\$396.81	\$382.17	\$363.49	\$361.43	\$331.47	\$325.39	\$310.56	\$300.25	\$282.24	\$282.14	\$262.10	\$232.90	\$215.03	\$218.95	\$218.34	\$263.01	\$318.14	\$384.38
39	\$401.52	\$386.71	\$367.80	\$365.72	\$335.41	\$329.25	\$314.26	\$303.81	\$285.59	\$285.49	\$265.22	\$235.67	\$217.58	\$221.56	\$220.93	\$266.14	\$321.91	\$388.95
40	\$417.36	\$401.96	\$382.31	\$380.15	\$348.64	\$342.24	\$326.65	\$315.79	\$296.86	\$296.76	\$275.68	\$244.97	\$226.17	\$230.29	\$229.65	\$276.63	\$334.61	\$404.29
41	\$433.62	\$417.64	\$397.21	\$394.96	\$362.22	\$355.58	\$339.38	\$328.10	\$308.43	\$308.32	\$286.42	\$254.51	\$234.98	\$239.27	\$238.59	\$287.41	\$347.65	\$420.05
42	\$450.75	\$434.13	\$412.90	\$410.56	\$376.53	\$369.62	\$352.78	\$341.05	\$320.60	\$320.49	\$297.74	\$264.56	\$244.26	\$248.72	\$248.01	\$298.76	\$361.38	\$436.63
43	\$468.30	\$451.03	\$428.97	\$426.54	\$391.18	\$384.01	\$366.52	\$354.34	\$333.09	\$332.98	\$309.32	\$274.86	\$253.77	\$258.40	\$257.67	\$310.39	\$375.46	\$453.63
44	\$486.71	\$468.75	\$445.83	\$443.32	\$406.56	\$399.11	\$380.92	\$368.27	\$346.18	\$346.06	\$321.48	\$285.66	\$263.75	\$268.56	\$267.80	\$322.60	\$390.21	\$471.47
45	\$505.55	\$486.90	\$463.08	\$460.46	\$422.30	\$414.55	\$395.66	\$382.52	\$359.57	\$359.45	\$333.92	\$296.72	\$273.95	\$278.96	\$278.16	\$335.07	\$405.31	\$489.71
46	\$525.23	\$505.86	\$481.12	\$478.40	\$438.75	\$430.70	\$411.07	\$397.41	\$373.58	\$373.45	\$346.93	\$308.28	\$284.62	\$289.82	\$288.99	\$348.12	\$421.10	\$508.78
47	\$545.78	\$525.65	\$499.94	\$497.11	\$455.90	\$447.54	\$427.16	\$412.96	\$388.20	\$388.06	\$360.50	\$320.34	\$295.76	\$301.15	\$300.30	\$361.75	\$437.57	\$528.68
48	\$567.18	\$546.26	\$519.54	\$516.61	\$473.79	\$465.09	\$443.91	\$429.15	\$403.42	\$403.28	\$374.64	\$332.90	\$307.36	\$312.97	\$312.08	\$375.93	\$454.73	\$549.42
49	\$589.44	\$567.70	\$539.94	\$536.88	\$492.38	\$483.35	\$461.33	\$446.00	\$419.25	\$419.11	\$389.35	\$345.96	\$319.42	\$325.25	\$324.32	\$390.69	\$472.57	\$570.98
50	\$612.56	\$589.96	\$561.11	\$557.94	\$511.69	\$502.30	\$479.42	\$463.49	\$435.69	\$435.54	\$404.61	\$359.53	\$331.95	\$338.00	\$337.04	\$406.01	\$491.11	\$593.37
51	\$636.53	\$613.05	\$583.07	\$579.78	\$531.71	\$521.96	\$498.18	\$481.63	\$452.75	\$452.58	\$420.44	\$373.60	\$344.94	\$351.23	\$350.23	\$421.89	\$510.33	\$616.59
52	\$661.35	\$636.96	\$605.81	\$602.39	\$552.46	\$542.32	\$517.61	\$500.41	\$470.41	\$470.24	\$436.84	\$388.17	\$358.39	\$364.93	\$363.89	\$438.35	\$530.24	\$640.65
53	\$687.04	\$661.71	\$629.34	\$625.78	\$573.91	\$563.38	\$537.71	\$519.85	\$488.67	\$488.50	\$453.80	\$403.24	\$372.31	\$379.10	\$378.03	\$455.38	\$550.82	\$665.53
54	\$714.01	\$687.68	\$654.04	\$650.35	\$596.43	\$585.50	\$558.82	\$540.25	\$507.86	\$507.67	\$471.62	\$419.07	\$386.93	\$393.99	\$392.87	\$473.25	\$572.45	\$691.65
55	\$741.83	\$714.47	\$679.53	\$675.68	\$619.68	\$608.31	\$580.59	\$561.30	\$527.64	\$527.46	\$490.00	\$435.41	\$402.00	\$409.34	\$408.18	\$491.69	\$594.76	\$718.60
56	\$770.94	\$742.50	\$706.19	\$702.20	\$643.99	\$632.17	\$603.38	\$583.33	\$548.34	\$548.16	\$509.23	\$452.48	\$417.78	\$425.39	\$424.19	\$510.98	\$618.09	\$746.80
57	\$800.90	\$771.37	\$733.64	\$729.49	\$669.02	\$656.75	\$626.83	\$606.00	\$569.66	\$569.46	\$529.02	\$470.07	\$434.02	\$441.93	\$440.67	\$530.84	\$642.12	\$775.83
58	\$832.16	\$801.47	\$762.26	\$757.96	\$695.12	\$682.37	\$651.29	\$629.64	\$591.88	\$591.68	\$549.66	\$488.42	\$450.95	\$459.17	\$457.87	\$551.56	\$667.17	\$806.10
59	\$864.68	\$832.79	\$792.07	\$787.59	\$722.30	\$709.05	\$676.75	\$654.26	\$615.03	\$614.82	\$571.14	\$507.51	\$468.58	\$477.12	\$475.77	\$573.12	\$693.25	\$837.60
60	\$898.50	\$865.37	\$823.04	\$818.39	\$750.55	\$736.78	\$703.22	\$679.85	\$639.07	\$638.86	\$593.48	\$527.36	\$486.91	\$495.78	\$494.38	\$595.53	\$720.37	\$870.36
61	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36
62	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36
63	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36
64+	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36

Rates effective April 1, 2016 District of Columbia Small Group Exchange Appendix II-B

19 20 22 23 21 24 Gold Gold Gold Gold Platinum Platinum KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel P DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$293.95 \$283.11 \$269.26 \$267.74 \$245.55 \$241.04 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 21 22 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 23 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 \$272.95 24 \$326.76 \$314.71 \$299.32 \$297.62 \$267.95 25 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 26 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 27 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 \$334.40 \$322.07 \$306.32 \$274.22 28 \$304.58 \$279.34 \$341.59 \$328.99 \$312.90 \$285.34 29 \$311.14 \$280.11 \$292.48 30 \$350.13 \$337.22 \$320.73 \$318.92 \$287.12 \$359.12 \$345.88 \$328.96 \$327.11 31 \$299.98 \$294.49 32 \$367.22 \$353.67 \$336.37 \$334.47 \$306.74 \$301.11 33 \$375.75 \$361.89 \$344.19 \$342.24 \$313.88 \$308.12 34 \$384.75 \$370.56 \$352.43 \$350.43 \$321.39 \$315.50 35 \$393,73 \$379.21 \$360.66 \$358.62 \$328.90 \$322.86 36 \$402.72 \$387.87 \$368.90 \$366.81 \$336.41 \$330.23 37 \$411.71 \$396.53 \$377.13 \$375.00 \$343.92 \$337.61 38 \$416.66 \$401.29 \$381.66 \$379.50 \$348.04 \$341.66 39 \$421.60 \$406.05 \$386.19 \$384.01 \$352.18 \$345.71 40 \$438.23 \$422.06 \$401.43 \$399.16 \$366.07 \$359.35 \$455.31 \$438.51 \$417.07 \$373.36 41 \$414.71 \$380.33 42 \$473.29 \$455.83 \$433.54 \$431.09 \$395.35 \$388.10 43 \$491.72 \$473.58 \$450.42 \$447.87 \$410.75 \$403.21 44 \$511.04 \$492.19 \$468.13 \$465.47 \$426.89 \$419.06 \$530.82 \$443.41 45 \$511.24 \$486.24 \$483.49 \$435.28 \$551.50 \$531.15 \$505.17 \$502.32 \$460.68 46 \$452.23 \$573.07 \$551.93 \$524.94 \$521.98 \$478.71 47 \$469.92 \$595.54 \$573.57 \$545.53 \$542.44 \$497.48 \$488.35 48 \$618.91 \$596.09 \$566.94 \$563.73 \$517.00 49 \$507.51 50 \$643.19 \$619.47 \$589.17 \$585.84 \$537.28 \$527.42 51 \$668.35 \$643.70 \$612.22 \$608.76 \$558.29 \$548.06 52 \$694.42 \$668.82 \$636.11 \$632.51 \$580.07 \$569.43 53 \$721.39 \$694.79 \$660.81 \$657.07 \$602.60 \$591.55 54 \$749.70 \$722.06 \$686.75 \$682.87 \$626.25 \$614.77 55 \$778.92 \$750.20 \$713.51 \$709.47 \$650.66 \$638.72 56 \$809.48 \$779.63 \$741.51 \$737.31 \$676.19 \$663.78 57 \$840.95 \$809.94 \$770.32 \$765.96 \$702.47 \$689.58 \$841.54 \$800.38 \$873.76 \$795.86 \$729.88 \$716.49 58 59 \$907.92 \$874.44 \$831.67 \$826.96 \$758.42 \$744.50 \$943.42 60 \$908.64 \$864.19 \$859.31 \$788.07 \$773.62 \$980.28 \$944.13 \$897.96 \$892.86 \$818.85 \$803.85 61 62 \$980.28 \$944.13 \$897.96 \$892.86 \$818.85 \$803.85 63 \$980.28 \$944.13 \$897.96 \$892.86 \$818.85 \$803.85

\$897.96

\$892.86

\$818.85

\$803.85

\$980.28

64+

\$944.13

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective July 1, 2016 District of Columbia Small Group Exchange Appendix III-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	P DC Platinum 0/20/Dental/Ped Dent CF	DC Platinum 500/20/Dental/Ped Dent	KP DC Gold 0/20/Dental/Ped Dental	DC Gold 500/20/Dental/Ped D	P DC Gold 1000/30/Dental/Ped Den	CP DC Gold 1350/0%/HSA/Dental/Ped Dent	KP DC Gold 1500/10/HSA/Dental/Ped Dental	P DC Silver 1250/35/Dental/Ped De	nt P DC Silver 2000/35/Dental/Ped Dents	P DC Silver 1500/30/HSA/Dental/Ped Den	tr KP DC Silver 2500/30/10%/HSA/Dental/Ped De	ntal P DC Bronze 4500/50/Dental/Ped Den	P DC Bronze 6000/30/10%/HSA/Dental/Ped Den	P DC Bronze 5000/20%/HSA/Dental/Ped D	enKP DC Bronze 5000/20/HSA/Dental/Ped Denta	CP DC Bronze 4500/S0/POS/Dental/Ped Den	tt KP DC Silver 2000/35/POS/Dental/Ped Denta	KP DC Gold 1000/30/POS/Dental/Ped Dental
20 and Unde	er \$282.36	\$271.94	\$258.65	\$257.18	\$235.86	\$231.54	\$220.99	\$213.64	\$200.84	\$200.77	\$186.50	\$165.72	\$153.02	\$155.80	\$155.35	\$187.14	\$226.38	\$273.52
21	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
22	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
23	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
24	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
25	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
26	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
27	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
28	\$321.22	\$309.37	\$294.24	\$292.57	\$268.32	\$263.40	\$251.40	\$243.04	\$228.46	\$228.39	\$212.17	\$188.53	\$174.07	\$177.25	\$176.74	\$212.90	\$257.53	\$311.16
29	\$328.13	\$316.02	\$300.57	\$298.87	\$274.09	\$269.06	\$256.81	\$248.27	\$233.38	\$233.31	\$216.74	\$192.59	\$177.82	\$181.05	\$180.54	\$217.48	\$263.07	\$317.85
30	\$336.32	\$323.92	\$308.08	\$306.34	\$280.95	\$275.79	\$263.22	\$254.48	\$239.22	\$239.14	\$222.15	\$197.40	\$182.26	\$185.58	\$185.06	\$222.92	\$269.64	\$325.80
31	\$344.96	\$332.23	\$315.99	\$314.20	\$288.16	\$282.87	\$269.98	\$261.02	\$245.36	\$245.27	\$227.85	\$202.46	\$186.94	\$190.35	\$189.81	\$228.64	\$276.57	\$334.16
32	\$352.73	\$339.72	\$323.11	\$321.28	\$294.65	\$289.25	\$276.06	\$266.90	\$250.89	\$250.80	\$232.99	\$207.03	\$191.15	\$194.63	\$194.08	\$233.80	\$282.80	\$341.69
33	\$360.93	\$347.63	\$330.62	\$328.76	\$301.50	\$295.97	\$282.49	\$273.10	\$256.72	\$256.63	\$238.40	\$211.84	\$195.60	\$199.16	\$198.60	\$239.23	\$289.38	\$349.63
34	\$369.57	\$355.94	\$338.53	\$336.62	\$308.72	\$303.05	\$289.25	\$279.63	\$262.86	\$262.78	\$244.11	\$216.91	\$200.28	\$203.93	\$203.35	\$244.95	\$296.30	\$357.99
35	\$378.20	\$364.26	\$346.44	\$344.48	\$315.93	\$310.13	\$296.00	\$286.16	\$269.00	\$268.91	\$249.82	\$221.97	\$204.96	\$208.69	\$208.10	\$250.67	\$303.22	\$366.36
36	\$386.84	\$372.57	\$354.35	\$352.35	\$323.14	\$317.21	\$302.77	\$292.70	\$275.15	\$275.06	\$255.51	\$227.05	\$209.63	\$213.45	\$212.85	\$256.40	\$310.14	\$374.73
37	\$395.48	\$380.89	\$362.26	\$360.21	\$330.35	\$324.29	\$309.52	\$299.24	\$281.29	\$281.19	\$261.22	\$232.12	\$214.30	\$218.22	\$217.60	\$262.13	\$317.07	\$383.09
38	\$400.22	\$385.46	\$366.61	\$364.53	\$334.32	\$328.19	\$313.23	\$302.83	\$284.67	\$284.57	\$264.35	\$234.90	\$216.88	\$220.84	\$220.21	\$265.27	\$320.87	\$387.69
39	\$404.97	\$390.04	\$370.96	\$368.87	\$338.29	\$332.08	\$316.96	\$306.42	\$288.05	\$287.94	\$267.50	\$237.69	\$219.45	\$223.46	\$222.83	\$268.42	\$324.68	\$392.29
40	\$420.95	\$405.42	\$385.59	\$383.41	\$351.63	\$345.18	\$329.46	\$318.50	\$299.41	\$299.31	\$278.05	\$247.07	\$228.11	\$232.27	\$231.62	\$279.00	\$337.48	\$407.77
41	\$437.35	\$421.22	\$400.62	\$398.36	\$365.34	\$358.63	\$342.30	\$330.92	\$311.08	\$310.96	\$288.88	\$256.69	\$237.00	\$241.32	\$240.64	\$289.88	\$350.64	\$423.66
42	\$454.62	\$437.86	\$416.44	\$414.08	\$379.76	\$372.79	\$355.81	\$343.98	\$323.35	\$323.24	\$300.29	\$266.84	\$246.36	\$250.85	\$250.14	\$301.33	\$364.48	\$440.38
43	\$472.32	\$454.91	\$432.66	\$430.21	\$394.54	\$387.31	\$369.67	\$357.38	\$335.95	\$335.84	\$311.98	\$277.22	\$255.95	\$260.62	\$259.89	\$313.06	\$378.68	\$457.53
44	\$490.89	\$472.78	\$449.66	\$447.12	\$410.05	\$402.54	\$384.20	\$371.43	\$349.15	\$349.03	\$324.24	\$288.12	\$266.01	\$270.86	\$270.10	\$325.37	\$393.57	\$475.52
45	\$509.89	\$491.08	\$467.06	\$464.42	\$425.92	\$418.11	\$399.06	\$385.80	\$362.66	\$362.54	\$336.79	\$299.27	\$276.31	\$281.35	\$280.55	\$337.95	\$408.79	\$493.92
46	\$529.74	\$510.20	\$485.25	\$482.51	\$442.52	\$434.40	\$414.60	\$400.83	\$376.79	\$376.66	\$349.91	\$310.92	\$287.07	\$292.31	\$291.47	\$351.12	\$424.71	\$513.15
47	\$550.47	\$530.16	\$504.23	\$501.38	\$459.82	\$451.39	\$430.83	\$416.50	\$391.53	\$391.40	\$363.60	\$323.09	\$298.30	\$303.74	\$302.88	\$364.86	\$441.33	\$533.22
48	\$572.05	\$550.95	\$524.01	\$521.05	\$477.85	\$469.09	\$447.72	\$432.84	\$406.88	\$406.75	\$377.86	\$335.75	\$310.00	\$315.65	\$314.76	\$379.16	\$458.64	\$554.14
49	\$594.50	\$572.58	\$544.58	\$541.49	\$496.61	\$487.50	\$465.29	\$449.83	\$422.85	\$422.71	\$392.69	\$348.93	\$322.16	\$328.04	\$327.11	\$394.04	\$476.63	\$575.89
50	\$617.82	\$595.03	\$565.93	\$562.73	\$516.08	\$506.61	\$483.54	\$467.47	\$439.43	\$439.28	\$408.08	\$362.62	\$334.80	\$340.90	\$339.94	\$409.50	\$495.33	\$598.47
51	\$642.00	\$618.32	\$588.07	\$584.76	\$536.28	\$526.44	\$502.46	\$485.77	\$456.63	\$456.47	\$424.05	\$376.81	\$347.90	\$354,25	\$353.24	\$425.52	\$514.71	\$621.89
52	\$667.03	\$642.44	\$611.01	\$607.56	\$557.20	\$546.98	\$522.05	\$504.71	\$474.45	\$474.28	\$440.59	\$391.50	\$361.47	\$368.06	\$367.01	\$442.12	\$534.79	\$646.15
53	\$692.94	\$667.39	\$634.75	\$631.15	\$578.84	\$568.22	\$542.33	\$524.31	\$492.87	\$492.70	\$457.70	\$406.71	\$375.51	\$382.35	\$381.28	\$459.29	\$555.55	\$671.24
54	\$720.14	\$693.58	\$659.66	\$655.94	\$601.55	\$590.53	\$563.62	\$544.89	\$512.22	\$512.03	\$475.67	\$422.67	\$390.25	\$397.37	\$396.24	\$477.32	\$577.36	\$697.59
55	\$748.20	\$720.61	\$685.36	\$681.49	\$625.00	\$613.54	\$585.58	\$566.12	\$532.18	\$531.99	\$494.21	\$439.15	\$405.46	\$412.85	\$411.68	\$495.91	\$599.86	\$724.77
56	\$777.56	\$748.88	\$712.26	\$708.23	\$649.53	\$637.60	\$608.56	\$588.34	\$553.05	\$552.87	\$513.60	\$456.37	\$421.37	\$429.05	\$427.84	\$515.37	\$623.40	\$753.21
57	\$807.78	\$778.00	\$739.94	\$735.76	\$674.76	\$662.39	\$632.21	\$611.21	\$574.55	\$574.35	\$533.56	\$474.11	\$437.74	\$445.73	\$444.46	\$535.40	\$647.63	\$782.49
58	\$839.31	\$808.35	\$768.81	\$764.47	\$701.09	\$688.23	\$656.88	\$635.05	\$596.96	\$596.76	\$554.38	\$492.62	\$454.82	\$463.11	\$461.80	\$556.30	\$672.90	\$813.02
50	\$872.11	\$839.95	\$798.87	\$794.35	\$728.51	\$715.14	\$682.57	\$659.88	\$620.31	\$620.10	\$576.05	\$511.87	\$472.61	\$481.22	\$479.86	\$578.04	\$699.21	\$844.80
60	\$8/2.11 \$906.22	\$839.95 \$872.80	\$830.11	\$825.42	\$728.31	\$713.14	\$709.26	\$685.69	\$620.51 \$644.56	\$620.10 \$644.35	\$576.05 \$598.58	\$531.89	\$472.61 \$491.09	\$481.22 \$500.04	\$479.86 \$498.63	\$578.04	\$726.55	\$877.84
61	\$941.61	\$906.89	\$862.54	\$857.67	\$786.56	\$772.13	\$736.97	\$712.46	\$669.74	\$669.52	\$621.97	\$552.66	\$510.27	\$519.58	\$518.10	\$624.12	\$754.93	\$912.13
62	\$941.61 \$941.61	\$906.89 \$906.89	\$802.54 \$862.54	\$857.67	\$786.56	\$772.13	\$736.97	\$712.46 \$712.46	\$669.74 \$669.74	\$669.52 \$669.52	\$621.97	\$552.66	\$510.27 \$510.27	\$519.58 \$519.58	\$518.10	\$624.12 \$624.12	\$754.93	\$912.13 \$912.13
62	\$941.61	\$906.89	\$862.54	\$857.67	\$786.56	\$772.13	\$736.97	\$712.46	\$669.74	\$669.52	\$621.97	\$552.66	\$510.27 \$510.27	\$519.58	\$518.10	\$624.12	\$754.93	\$912.13
64+	\$941.61 \$941.61	\$906.89 \$906.89	\$862.54 \$862.54	\$857.67	\$786.56 \$786.56	\$772.13 \$772.13	\$736.97 \$736.97	\$712.46 \$712.46	\$669.74 \$669.74	\$669.52 \$669.52	\$621.97 \$621.97	\$552.66 \$552.66	\$510.27 \$510.27	\$519.58 \$519.58	\$518.10 \$518.10	\$624.12 \$624.12	\$754.93 \$754.93	\$912.13 \$912.13
04±	3741.01	3200.89	3002.34	3637.07	a180.30	\$1/2.13	3/30.9/	3/12.40	3009.74	3009.32	3021.97	3332.00	3310.27	3319.38	3318.10	3024.12	3/34.93	3712.13

Rates effective July 1, 2016 District of Columbia Small Group Exchange Appendix III-B

19 20 22 23 21 24 Gold Gold Gold Platinum Gold Platinum KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel P DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$296.48 \$285.54 \$271.58 \$270.04 \$247.66 \$243.11 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 21 22 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 23 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 \$300.18 \$275.30 24 \$329.57 \$317.41 \$301.89 \$270.25 25 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 26 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 27 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 \$337.27 \$308.95 \$307.20 28 \$324.84 \$281.74 \$276.57 \$344.52 \$331.82 \$315.59 \$287.79 29 \$313.81 \$282.51 30 \$353.14 \$340.12 \$323.49 \$321.66 \$294.99 \$289.58 \$362.20 \$348.85 \$329.92 \$302.56 31 \$331.79 \$297.02 32 \$370.37 \$356.71 \$339.26 \$337.34 \$309.38 \$303.70 33 \$378.98 \$365.00 \$347.15 \$345.18 \$316.58 \$310.77 34 \$388.05 \$373.74 \$355.46 \$353,44 \$324.15 \$318.21 \$382.47 \$325.63 35 \$397.12 \$363.76 \$361.70 \$331.73 36 \$406.18 \$391.21 \$372.07 \$369.96 \$339.29 \$333.07 37 \$415.24 \$399,93 \$380.37 \$378.22 \$346.87 \$340.51 38 \$420.24 \$404.73 \$384.94 \$382.76 \$351.03 \$344.59 39 \$425.22 \$409.54 \$389.51 \$387.31 \$355.20 \$348.68 40 \$442.00 \$425.69 \$404.88 \$402.59 \$369.21 \$362,44 \$459.22 \$442.28 \$420.65 \$383.60 41 \$418.27 \$376.57 42 \$477.36 \$459.75 \$437.27 \$434.79 \$398.74 \$391.43 43 \$495.94 \$477.65 \$454.28 \$451.72 \$414.28 \$406.68 44 \$515.43 \$496.42 \$472.15 \$469.47 \$430.55 \$422.66 \$535.38 \$447.22 45 \$515.64 \$490.42 \$487.64 \$439.02 \$535.72 \$509.51 \$506.63 \$464.64 46 \$556.23 \$456.12 \$577.99 \$556.67 \$529.45 \$526.46 \$482.82 47 \$473.96 \$578.50 \$550.21 \$547.10 \$501.75 48 \$600.66 \$492.54 \$624.23 \$571.81 \$568.57 49 \$601.21 \$521.44 \$511.87 50 \$648.71 \$594.23 \$590.87 \$541.89 \$531.95 \$624.79 51 \$674.09 \$649.23 \$617.48 \$613.99 \$563.09 \$552,77 52 \$700.39 \$674.56 \$641.57 \$637.94 \$585.05 \$574.32 53 \$727.59 \$700.76 \$666.48 \$662.71 \$607.78 \$596.63 54 \$756.14 \$728.26 \$692.65 \$688.73 \$631.63 \$620.05 55 \$785.61 \$756.64 \$719.64 \$715.57 \$656.25 \$644.21 56 \$816.44 \$786.33 \$747.87 \$743.64 \$682.00 \$669.48 57 \$848.18 \$816.90 \$776.94 \$772.54 \$708.51 \$695.51 \$848.77 \$807.25 \$881.27 \$802.69 \$736.15 \$722.65 58 59 \$915.72 \$881.95 \$838.82 \$834.07 \$764.93 \$750.90 60 \$951.53 \$916.44 \$871.61 \$866.69 \$794.84 \$780.26 \$988.71 \$952.23 \$905.67 \$900.54 \$825.90 \$810.75 61 \$952.23 62 \$988.71 \$905.67 \$900.54 \$825.90 \$810.75 63 \$988.71 \$952.23 \$905.67 \$900.54 \$825.90 \$810.75

\$905.67

\$900.54

\$825.90

\$810.75

\$988.71

64+

\$952.23

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective October 1, 2016 District of Columbia Small Group Exchange Appendix IV-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Γ	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	DC Platinum 0/20/Dental/Ped D	Den P DC Platinum 500/20/Dental/Ped Den	KP DC Gold 0/20/Dental/Ped Dental	DC Gold 500/20/Dental/Ped D	P DC Gold 1000/30/Dental/Ped Den	P DC Gold 1350/0%/HSA/Dental/Ped D	ten KP DC Gold 1500/10/HSA/Dental/Ped Dental P	DC Silver 1250/35/Dental/Ped I	en P DC Silver 2000/35/Dental/Ped E	en P DC Säver 1500/30/HSA/Dental/Ped Den	KP DC Silver 2500/30/10%/HSA/Dental/Ped Denta	P DC Bronze 4500/50/Dental/Ped	Den DC Bronze 6000/30/10%/HSA/Dental/Ped De	DC Bronze 5000/20%/HSA/Dental/Ped Do	P DC Bronze 5000/20/HSA/Dental/Ped Dent	KP DC Bronze 4500/50/POS/Dental/Ped Dental	KP DC Silver 2000/35/POS/Dental/Ped Dental	KP DC Gold 1000/30/POS/Dental/Ped Dental
20 and Under	\$284.78	\$274.28	\$260.87	\$259.39	\$237.89	\$233.53	\$222.89	\$215.48	\$202.56	\$202.49	\$188.11	\$167.14	\$154.33	\$157.14	\$156.69	\$188.75	\$228.32	\$275.87
21	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
22	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
23	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
24	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
25	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
26	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
27	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
28	\$323.98	\$312.02	\$296.77	\$295.09	\$270.63	\$265.66	\$253.56	\$245.13	\$230.43	\$230.36	\$213.99	\$190.15	\$175.57	\$178.77	\$178.26	\$214.73	\$259.74	\$313.83
29	\$330.94	\$318.73	\$303.15	\$301.44	\$276.44	\$271.37	\$259.01	\$250.40	\$235.38	\$235.31	\$218.60	\$194.24	\$179.34	\$182.61	\$182.09	\$219.35	\$265.33	\$320.58
30	\$339.21	\$326.71	\$310.72	\$308.97	\$283.36	\$278.16	\$265.49	\$256.66	\$241.27	\$241.19	\$224.06	\$199.09	\$183.83	\$187.17	\$186.65	\$224.84	\$271.96	\$328.59
31	\$347.92	\$335.09	\$318.70	\$316.90	\$290.63	\$285.30	\$272.30	\$263.26	\$247.47	\$247.38	\$229.81	\$204.20	\$188.55	\$191.98	\$191.44	\$230.60	\$278.95	\$337.03
32	\$355.76	\$342.64	\$325.89	\$324.04	\$297.18	\$291.73	\$278.43	\$269.19	\$253.04	\$252.96	\$234.99	\$208.81	\$192.79	\$196.30	\$195.75	\$235.80	\$285.23	\$344.62
33	\$364.03	\$350.61	\$333.46	\$331.58	\$304.09	\$298.51	\$284.92	\$275.45	\$258.93	\$258.84	\$240.45	\$213.66	\$197.28	\$200.87	\$200.30	\$241.28	\$291.86	\$352.63
34	\$372.74	\$358.99	\$341.44	\$339.51	\$311.37	\$305.65	\$291.73	\$282.03	\$265.12	\$265.03	\$246.21	\$218.77	\$202.00	\$205.68	\$205.10	\$247.06	\$298.84	\$361.07
35	\$381.45	\$367.39	\$349.41	\$347.44	\$318.64	\$312.79	\$298.54	\$288.62	\$271.31	\$271.22	\$251.96	\$223.88	\$206.72	\$210.48	\$209.89	\$252.82	\$305.83	\$369.51
36	\$390.16	\$375.77	\$357.39	\$355.37	\$325.92	\$319.93	\$305.37	\$295.22	\$277.51	\$277.42	\$257.71	\$229.00	\$211.43	\$215.28	\$214.68	\$258.60	\$312.80	\$377.94
37	\$398.87	\$384.16	\$365.38	\$363.30	\$333.19	\$327.08	\$312.18	\$301.81	\$283.71	\$283.60	\$263.46	\$234.11	\$216.15	\$220.10	\$219.47	\$264.38	\$319.79	\$386.38
38	\$403.66	\$388.77	\$369.76	\$367.66	\$337.19	\$331.01	\$315.92	\$305.43	\$287.11	\$287.01	\$266.62	\$236.92	\$218.74	\$222.73	\$222.11	\$267.55	\$323.63	\$391.02
39	\$408.45	\$393.39	\$374.15	\$372.03	\$341.19	\$334.93	\$319.68	\$309.05	\$290.52	\$290.42	\$269.79	\$239.73	\$221.34	\$225.38	\$224.74	\$270.73	\$327.47	\$395.66
40	\$424.57	\$408.90	\$388.90	\$386.71	\$354.65	\$348.15	\$332.29	\$321.24	\$301.98	\$301.88	\$280.43	\$249.19	\$230.07	\$234.26	\$233.61	\$281.40	\$340.38	\$411.27
41	\$441.10	\$424.84	\$404.07	\$401.78	\$368.47	\$361.71	\$345.24	\$333.77	\$313.75	\$313.64	\$291.36	\$258.90	\$239.04	\$243.40	\$242.71	\$292.37	\$353.65	\$427.29
42	\$458.53	\$441.62	\$420.02	\$417.64	\$383.02	\$375.99	\$358.87	\$346.94	\$326.13	\$326.02	\$302.87	\$269.13	\$248.47	\$253.01	\$252.29	\$303.92	\$367.61	\$444.16
43	\$476.38	\$458.81	\$436.37	\$433.90	\$397.93	\$390.64	\$372.85	\$360.45	\$338.83	\$338.72	\$314.66	\$279.60	\$258.15	\$262.86	\$262.12	\$315.75	\$381.94	\$461.46
44	\$495.10	\$476.84	\$453.52	\$450.96	\$413.58	\$405.99	\$387.50	\$374.62	\$352.15	\$352.03	\$327.02	\$290.59	\$268.30	\$273.19	\$272.42	\$328.16	\$396.95	\$479.60
45	\$514.27	\$495.30	\$471.07	\$468.41	\$429.58	\$421.70	\$402.49	\$389.12	\$365.78	\$365.65	\$339.69	\$301.84	\$278.68	\$283.77	\$282.96	\$340.85	\$412.30	\$498.16
46	\$534.30	\$514.59	\$489.42	\$486.66	\$446.32	\$438.13	\$418.16	\$404.27	\$380.03	\$379.89	\$352.92	\$313.59	\$289.53	\$294.82	\$293.98	\$354.13	\$428.36	\$517.56
47	\$555.19	\$534.72	\$508.56	\$505.69	\$463.77	\$455.26	\$434.53	\$420.08	\$394.89	\$394.76	\$366.72	\$325.87	\$300.86	\$306.35	\$305.48	\$367.99	\$445.12	\$537.80
48	\$576.97	\$555.69	\$528.51	\$525.52	\$481.96	\$473.12	\$451.57	\$436.56	\$410.38	\$410.24	\$381.10	\$338.64	\$312.66	\$318.37	\$317.46	\$382.42	\$462.58	\$558.90
49	\$599.61	\$577.50	\$549.25	\$546.15	\$500.88	\$491.69	\$469.29	\$453.69	\$426.48	\$426.34	\$396.06	\$351.93	\$324.93	\$330.86	\$329.92	\$397.43	\$480.73	\$580.83
50	\$623.13	\$600.14	\$570.79	\$567.57	\$520.52	\$510.96	\$487.69	\$471.48	\$443.21	\$443.05	\$411.59	\$365.74	\$337.67	\$343.83	\$342.86	\$413.01	\$499.59	\$603.61
51	\$647.51	\$623.63	\$593.13	\$589.78	\$540.88	\$530.96	\$506.78	\$489.94	\$460.56	\$460.39	\$427.69	\$380.05	\$350.89	\$357.29	\$356.28	\$429.17	\$519.13	\$627.23
52	\$672.76	\$647.95	\$616.26	\$612.78	\$561.99	\$551.68	\$526.54	\$509.05	\$478.52	\$478.36	\$444.38	\$394.86	\$364.58	\$371.22	\$370.17	\$445.92	\$539.38	\$651.70
53	\$698.89	\$673.12	\$640.20	\$636.58	\$583.81	\$573.10	\$546.99	\$528.82	\$497.10	\$496.93	\$461.63	\$410.20	\$378.73	\$385.64	\$384.55	\$463.24	\$560.32	\$677.01
54	\$726.33	\$699.54	\$665.32	\$661.57	\$606.72	\$595.60	\$568.46	\$549.57	\$516.62	\$516.43	\$479.75	\$426.30	\$393.60	\$400.78	\$399.64	\$481.42	\$582.32	\$703.58
55	\$754.63	\$726.80	\$691.25	\$687.34	\$630.37	\$618.81	\$590.61	\$570.98	\$536.75	\$536.56	\$498.46	\$442.92	\$408.94	\$416.40	\$415.22	\$500.17	\$605.02	\$731.00
56	\$784.24	\$755.31	\$718.38	\$714.32	\$655.11	\$643.08	\$613.79	\$593.39	\$557.80	\$557.62	\$518.01	\$460.29	\$424.99	\$432.73	\$431.51	\$519.80	\$628.76	\$759.68
57	\$814.72	\$784.68	\$746.30	\$742.08	\$680.56	\$668.08	\$637.64	\$616.46	\$579.49	\$579.28	\$538.14	\$478.18	\$441.50	\$449.56	\$448.28	\$540.00	\$653.20	\$789.21
58	\$846.51	\$815.29	\$775.41	\$771.03	\$707.11	\$694.14	\$662.52	\$640.51	\$602.09	\$601.89	\$559.14	\$496.85	\$458.73	\$467.09	\$465.77	\$561.07	\$678.68	\$820.00
59	\$879.60	\$847.16	\$805.73	\$801.18	\$734.76	\$721.28	\$688.43	\$665.55	\$625.64	\$625.42	\$581.00	\$516.27	\$476.67	\$485.36	\$483.98	\$583.01	\$705.22	\$852.05
60	\$914.00	\$880.30	\$837.24	\$832.51	\$763.50	\$749.50	\$715.35	\$691.58	\$650.10	\$649.88	\$603.72	\$536.46	\$495.31	\$504.34	\$502.91	\$605.81	\$732.79	\$885.38
61	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97
62	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97
63	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97
64+	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97

Rates effective October 1, 2016 District of Columbia Small Group Exchange Appendix IV-B

19 20 22 23 21 24 Gold Gold Platinum Gold Gold Platinum KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel P DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$299.03 \$288.00 \$273.91 \$272.36 \$249.79 \$245.20 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 21 22 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 23 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 \$332.40 24 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 25 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 26 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 27 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 \$327.63 28 \$340.17 \$311.60 \$309.84 \$284.16 \$278.95 \$347.48 \$334.67 \$318.30 \$316.51 \$290.26 29 \$284.94 30 \$356.17 \$343.04 \$326.27 \$324.42 \$297.53 \$292.07 \$365.31 \$334.64 \$332.75 31 \$351.84 \$305.16 \$299.57 32 \$373.55 \$359.77 \$342.18 \$340.24 \$312.03 \$306.31 33 \$382.23 \$368.14 \$350.13 \$348.15 \$319.30 \$313.44 34 \$391.38 \$376.95 \$358.51 \$356.48 \$326.93 \$320.94 \$385.75 35 \$400.53 \$366.88 \$364.81 \$334.58 \$328.43 36 \$409.67 \$394.57 \$375.27 \$373.14 \$342.21 \$335.93 37 \$418.81 \$403.37 \$383.64 \$381.47 \$349.85 \$343.43 38 \$423.85 \$408.21 \$388.25 \$386.05 \$354.05 \$347.55 39 \$428.87 \$413.05 \$392.85 \$390.64 \$358.26 \$351.68 40 \$445.79 \$429.35 \$408.35 \$406.05 \$372.38 \$365.55 \$424.27 41 \$463.16 \$446.08 \$421.87 \$386.89 \$379.80 42 \$481.46 \$463.70 \$441.02 \$438.53 \$402.17 \$394.79 43 \$500.20 \$481.75 \$458.19 \$455.60 \$417.83 \$410.17 44 \$519.86 \$500.68 \$476.20 \$473.51 \$434.25 \$426.29 \$539.98 45 \$520.06 \$494.63 \$491.83 \$451.06 \$442.79 \$540.32 \$513.89 \$510.98 \$468.63 46 \$561.01 \$460.03 \$582.96 \$561.45 \$534.00 \$530.98 \$486.97 47 \$478.03 \$605.82 \$583.47 \$554.94 48 \$551.80 \$506.06 \$496.77 \$606.37 \$576.72 \$573.46 \$525.92 49 \$629.59 \$516.27 50 \$654.28 \$630.15 \$599.33 \$595.95 \$546.55 \$536.52 51 \$679.88 \$654.81 \$622.79 \$619.27 \$567.93 \$557.51 52 \$706.41 \$680.36 \$647.08 \$643,42 \$590.08 \$579.25 53 \$733.84 \$706.77 \$672.21 \$668.40 \$613.00 \$601.75 54 \$762.64 \$734.52 \$698.60 \$694.65 \$637.06 \$625.37 55 \$792.36 \$763.14 \$725.82 \$721.71 \$661.89 \$649.74 56 \$823.45 \$793.08 \$754.30 \$750.03 \$687.86 \$675.24 57 \$855.46 \$823.91 \$783.61 \$779.18 \$714.59 \$701.48 \$742.47 \$888.84 \$856.06 \$814.19 \$809.59 \$728.85 58 59 \$923.59 \$889.52 \$846.02 \$841.23 \$771.50 \$757.35 60 \$959.70 \$924.32 \$879.10 \$874.13 \$801.67 \$786.97 \$997.20 \$960.42 \$913.44 \$908.28 \$832.98 \$817.71 61 62 \$997.20 \$960.42 \$913.44 \$908.28 \$832.98 \$817.71 63 \$997.20 \$960.42 \$913.44 \$908.28 \$832.98 \$817.71

\$913.44

\$832.98

\$817.71

\$908.28

\$997.20

64+

\$960.42

State: District of Columbia Filing Company: Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO

Product Name: 2016 DC Small Group

Project Name/Number: /

Supporting Document Schedules

Satisfied - Item:	Actuarial Justification
Comments:	
Attachment(s):	DC 2016 Small Group Actuarial Memorandum v5 with Exhibits.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Actuarial Memorandum
Comments:	
Attachment(s):	DC 2016 Small Group Actuarial Memorandum v5 with Exhibits.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Actuarial Memorandum and Certifications
Comments:	
Attachment(s):	DC 2016 Small Group Actuarial Memorandum v5 with Exhibits.pdf
Item Status:	
Status Date:	
Bypassed - Item:	Certificate of Authority to File
Bypass Reason:	NA
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Consumer Disclosure Form
Bypass Reason:	NA
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Cover Letter All Filings
Comments:	
Attachment(s):	DC 2016 Small Group Rate Filing Cover Letter.pdf
Item Status:	
Status Date:	

State: District of Columbia Filing Company: Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO

Product Name: 2016 DC Small Group

Project Name/Number: /

Satisfied - Item:	DISB Actuarial Memorandum Dataset
Comments:	
Attachment(s):	Kaiser Small Group DISB Plain Language Summary_v1.pdf 2016 Small Group DISB Actuarial Memo Dataset_v1 - outgoing.xlsx 2016 Small Group DISB Actuarial Memo Dataset_v1 - outgoing.pdf
Item Status:	
Status Date:	
Bypassed - Item:	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)
Bypass Reason:	NA NA
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	District of Columbia and Countrywide Loss Ratio Analysis (P&C)
Bypass Reason:	NA NA
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Unified Rate Review Template
Comments:	
Attachment(s):	Unified_Rate_Review_Template_2016_DC_SG_v1.xlsm Unified_Rate_Review_Template_2016_DC_SG_v1.pdf
Item Status:	
Status Date:	
Bypassed - Item:	2016 DISB Actuarial Memorandum Dataset
Bypass Reason:	In progress
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	District of Columbia Plain Language Summary
Bypass Reason:	In progress
Attachment(s):	
Item Status:	

State: District of Columbia Filing Company: Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO

Product Name: 2016 DC Small Group

Project Name/Number: /

Status Date:

State: District of Columbia Filing Company: Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO

Product Name: 2016 DC Small Group

Project Name/Number: /

Attachment 2016 Small Group DISB Actuarial Memo Dataset_v1 - outgoing.xlsx is not a PDF document and cannot be reproduced here.

Attachment Unified_Rate_Review_Template_2016_DC_SG_v1.xlsm is not a PDF document and cannot be reproduced here.

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

District of Columbia

2016 Small Group Rate Filing HIOS Issuer ID 94506

HIOS Product ID 94506DC035, 94506DC036

Form Numbers DC-SG-HMO-FACE(01-14)HIX, DC-SG-POS-FACE(01-14)HIX, EOC-COVER (1-05), DC-SG-WRAP(01-16)HIX, KFHP-EOC COVER (01/10)DC, DCLG-ALL-TOC(1-05), DC-SG-SEC1(01-16)HIX, DC-SG-SEC2(01-15)HIX, DC-SG-SEC3(01-16)HIX, DC-SG-SEC4(01-14)HIX, DC-SG-SEC5(01-16)HIX. DC-SG-SEC6(01-15)HIX. DC-SG-SEC7(01-14)HIX. DC-SG-APPX-DEF(01-16)HIX. DC-SG-PLATINUM-0-20-DENTAL-HMO-COST(01-16)HIX, DC-SG-GOLD-0-20-DENTAL-HMO-COST(01-16)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-COST(01-16)HIX, DC-SG-GOLD-500-20-DENTAL-DHMO-COST(01-16)HIX. DC-SG-GOLD-1000-30-DENTAL-DHMO-COST(01-16)HIX. DC-SG-SILVER-1250-35-DENTAL-DHMO-COST(01-16)HIX, DC-SG-SILVER-2000-35-DENTAL-DHMO-COST(01-16)HIX, DC-SG-BRONZE-4500-50-DENTAL-DHMO-COST(01-16)HIX, DC-SG-GOLD-1350-0%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-GOLD-1500-10-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-SILVER-1500-30-20%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-SILVER-2500-30-10%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-BRONZE-5000-20%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-BRONZE-5000-20-30%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-BRONZE-6000-30-10%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-BRONZE-4500-50-POS-DENTAL-COST(01-16)HIX, DC-SG-GOLD-1000-30-POS-DENTAL-COST(01-16)HIX, DC-SG-SILVER-2000-35-POS-DENTAL-COST(01-16)HIX, DC-SG-PLATINUM-0-20-DENTAL-HMO-RX(01-16)HIX, DC-SG-GOLD-0-20-DENTAL-HMO-RX(01-16)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-RX(01-16)HIX, DC-SG-GOLD-500-20-DENTAL-DHMO-RX(01-16)HIX, DC-SG-GOLD-1000-30-DENTAL-DHMO-RX(01-16)HIX, DC-SG-SILVER-1250-35-DENTAL-DHMO-RX(01-16)HIX, DC-SG-SILVER-2000-35-DENTAL-DHMO-RX(01-16)HIX, DC-SG-BRONZE-4500-50-DENTAL-DHMO-RX(01-16)HIX, DC-SG-GOLD-1350-0%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-GOLD-1500-10-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-SILVER-1500-30-20%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-SILVER-2500-30-10%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-BRONZE-5000-20%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-BRONZE-5000-20-30%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-BRONZE-6000-30-10%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-BRONZE-4500-50-POS-DENTAL-RX(01-16)HIX , DC-SG-GOLD-1000-30-POS-DENTAL-RX(01-16)HIX, DC-SG-SILVER-2000-35-POS-DENTAL-RX(01-16), DC-SG-DENTAL-ADULT(01-14)HIX, DC-SG-PED-DENTAL(01-15)HIX, DC-POS-AMEND(01-14)HIX

Actuarial Memorandum

I, John Xu, an Actuary for Kaiser Foundation Health Plan, Inc. (KFHP) am a member of the American Academy of Actuaries. I meet the qualification standards for certifying Regulatory Filings for Rates and Financial Projections for Health Plans. This Actuarial Certification applies to the attached filing for an approval of premium rates for Small Groups sold on the exchange. This actuarial memorandum documents the assumptions and sources of data pertaining to the development of Kaiser premium rates effective January 2016. It is intended to comply with the requirements outlined in the DC Health Benefit Exchange Authority's 2016 Carrier Reference Manual (April 2015, Version 1). It is not intended for any other purpose.

This rate filing applies to forms that are open to new sales and renewals. This filing does not cover grandfathered products that existed prior to March 23, 2010.

KFHP is an HMO company and offers traditional HMO copayment plans covering medical and pharmacy claims expenses. Kaiser also offers Deductible and High Deductible plans, some of which are HSA qualified and a limited number of Point of Service type plans. For purposes of regulation, these are all HMO products.

KFHP will market products to the Individual and Small Group markets through Direct Sales channels and Broker arrangements, as well as on the District of Columbia Marketplace (aka the Exchange). The products are guaranteed issue and guaranteed renewable.

I am the primary contact for this filing. My telephone number is 301-816-6349 and my email address is John.A.Xu@kp.org. Please also include Sheila Schroer on correspondence related to this filing, her email address is Sheila.A.Schroer@kp.org.

Proposed Rate Increases

The percent increase in the Market Adjusted Index Rate from 2015 to 2016 is -4.9%. The drivers of that change are shown in the table below, which contains all the components of the Market Adjusted Index Rate calculation. The numbers shown are the ratio of the 2016 to the 2015 factor, so a 1.000 indicates no impact on the rate change.

Source of Change	2016/2015
Based Period Experience	0.962
Base Period Utilization Copay	1.007
Pricing Trend	1.000
Morbidity Adjustment	0.945
Risk Adjustment Recoveries	1.047
Pent Up Demand	1.000
Reinsurance Recoveries	1.000
Reinsurance Premium	0.996
Average Age Impact	1.001
Additional EHB	0.995
Exchange Fee	1.000
Fixed Cost Adjustment	1.000
Total Market Adjusted Index Rate Change	95.1%

Plan level rate changes are shown in row 25 of Worksheet II in the URRT.

Experience Period Claims

Base period data:

The Revenue Requirement for 2016 for the new ACA plans is developed by accumulating medical and administrative expenses for essential health benefits (EHB) for non-grandfathered business in the Child-Only, Conversion, Dues Subsidy, ACA plans and Small Group lines of business incurred in 2014 including the incurred but not reported (IBNR) estimates for external expense. Allowed cost data from internal costs, fee for service claims, and prescription drug claims are trended to 2016. Allowed claims for internal services are allocated costs for medical services delivered within our integrated delivery system while allowed claims for external expenses are calculated as incurred plus member cost sharing.

Capitations:

KHFP has contracted with a dental provider to provide dental care to KFHP members. KFHP pays the provider a fixed capitation of \$1.15 PMPM to cover adult preventative. The \$1.15 PMPM is part of the base period allowed amount, shown in Exhibit 2. It is then removed as a non-Essential Health Benefit in Exhibit 3. Finally, this benefit is added back as part of the non-EHB adjustment in Exhibit 10.

Incurred Estimates on External Expense:

A common reserve tool developed and maintained by KFHP Actuarial Services is used to set KFHP's IBNR reserves. KFHP's common reserve tool uses historical claim lag averages to project anticipated future payments. IBNR levels are set for line of business and service line breakouts. Note that the IBNR applies only to KFHP's external allowed costs. Most of KFHP's expenses are internal fixed costs, which are allocated and lag in reporting is immaterial.

The completion factors used to complete the base period external claims are taken from KFHP's overall commercial line of business by type of service. The claims are incurred in 2014 and paid through 1/31/2015.

Premium:

Premium was captured for calendar year 2014 for all members in the base period single (combined Small Group and Individual) pool. There were no MLR rebates for these members in this period. For Dues Subsidy members, the whole premium was captured and not just the portion paid by the member.

Part I Unified Rate Review Template

Base Period Experience:

The base period experience in Worksheet 1 Section I and in Worksheet 2 Section III is the combined experience of the Small Group and Individual markets. The Index Rate of the Experience Period in cell G17 is taken from Exhibit 1 line 3. It is the per member per month allowed claims less non-essential health benefits from the base period. Therefore, it represents the average age of the members in the risk pool. The Index Rate for the Projection period, discussed below, is taken from Exhibit 1 Line 16.

Benefit Categories:

The benefit categories in Section II of Worksheet I are mapped based on type of service and place of treatment codes. For example:

Benefit Category	Services
Inpatient Hospital	Inpatient Facility, Inpatient Visits (Rounding), Inpatient Surgery - Non Maternity, Maternity

Outpatient Hospital	Outpatient Facility, Emergency/Urgent Care, Hospital Outpatient Other Professional, Outpatient Surgery
Professional	Diagnostic Services, Office Visits, Cardiovascular, Chemotherapy/Pharmacy, Dialysis, PT/OT/ST
Other Medical	Other Services
Capitation	Adult Preventive Dental
Prescription Drug	Pharmacy

Morbidity and Other Adjustments:

The morbidity adjustments in Section II Worksheet 1 are developed from row (14) in the attached Exhibit 1 and reflect the morbidity in the single risk pool (Small Group and Individual combined) of our expected 2016 membership. The development of these factors along with the documentation of these assumptions is included in Exhibit 7.1-7.3.

The "Other" adjustment in Section II Worksheet I is an adjustment to reflect that family contracts are limited to three dependents in 2016.

Also included in the "Other" adjustment is the base period utilization copay effect from Exhibit 4. The adjustment is necessary to convert the base period experience from an average plan allowed amount to the allowed amount for the reference plan. "Other" also includes additional EHB benefits in the projection period.

All the factors discussed above in the Morbidity and Other Adjustments are based on Small Group and Individual experience combined.

Paid to Allowed Ratio:

The Paid to Allowed Average Factor in the Projection Period in Section III of Worksheet I is an average plan factor for the plans listed in Worksheet II. It represents the change from the average benefit plan allowed amount to the average paid amount across the 2016 plans based on weightings in Worksheet 2 of the URRT.

The factor in cell v33 in Worksheet I of the URRT is calculated by weighting the plan design factors in Exhibit 10 by the projected members and allowed costs by plans in rows 81 and 100, respectively, of Worksheet II of the URRT.

Estimated Average Annual Premium per Policy:

The estimated average annual premium per policy based on the URRT and SERFF data included in the filing is \$8.013.86.

Risk Adjustment

Exhibit 7.1-7.3 documents the development of the Risk Adjustment index rate factor. The index rate is adjusted to reflect the expected change in morbidity of the members covered by these plans relative to the members in the base period data. It is also adjusted to reflect the risk adjustment receipts anticipated in the rating period based on the expect risk profile relative to the market of the Small Group line only based on DISB guidance.

Assumptions are documented regarding the current relative morbidity of KFHP's population along with the expected morbidity of the future market relative to KFHP. Growth assumptions for the market as a whole and KFHP specifically are used to calculate KFHP's 2016 expected relative morbidity to the market. This value is used to determine the expected risk adjustment impact to the market adjusted index rate.

Reinsurance

The reinsurance contribution for the Federal Reinsurance Program is included in the rate build up and shown as a factor in Exhibit 1, line (19).

Administrative Expense

Retention includes broker commissions, administrative expenses and capital contribution. Commissions are paid to Brokers of Record. The capital contribution is an amount needed to maintain and expand Kaiser's medical center facilities where members receive the majority of their health care. As a group model HMO, Kaiser owns a significant portion of the health care delivery system. In other health care delivery models, capital contributions are included in fee for service payments, whereas for Kaiser these are funded through premium rates.

Quarterly Rate Factors

Exhibit 11 contains the quarterly rate factors that will be applied to base rates for 2nd, 3rd and 4th 2016 effective dates. These adjustments are based on an annual trend of 3.5%. Kaiser reserves the right to amend this filing with new quarterly factors based on emerging experience and other subsequent events.

In order for the Index Rate in the Projection Period in Wk1 Section III of the URRT to reflect the average quarterly rate, a weighted average trend adjustment based on the assumed distribution of renewals throughout the year has been development.

	Q1	Q2	Q3	Q4	
Members	2,382	529	794	1,962	
Trend	3.5%	3.5%	3.5%	3.5%	Proj Index Adj
Months	24	27	30	33	for Small Group
	1.072	1.081	1.091	1.100	1.014

Profit and Risk Margin

As mentioned above, the capital contribution of 1.5%, shown in Exhibit 9, is an amount to maintain and expand Kaiser's medical center facilities where members receive the majority of their healthcare.

Taxes and Fees

Administrative expense has been adjusted to reflect the PCORI tax and the insurer tax that will apply in 2016. The amount is shown as percent in Exhibit 9.

Projected Loss Ratio

Based on a target admin percentage of 22.5%, which includes a 1.5% capital contribution margin, we anticipate an MLR based on federally prescribed methodology to be at least 80.4%. The MLR would be expected to be higher due to the required adjustments to both claims and premium in the prescribed methodology.

Market Adjusted Index Rate

The development of the index rate is summarized in Exhibit 1 and is based on combined experience of non-grandfathered Individual and Small Group experience as described above. The following factors along with Risk Adjustment described above have been considered in the development and are documented below.

Utilization copayment effect adjustment:

Allowed claims are grossed up for anticipated changes in the average utilization of services due to average cost sharing requirements in the base period. Member cost sharing results in lower utilization and, thus, lower allowed costs, than would otherwise occur in a zero cost share environment. An estimate based on industry standard factors has been made at the plan level to adjust our base period data to what would have been expected in a zero cost share environment in order to normalize for the utilization copayment effect. These adjustments are documented in Exhibit 4.

Demographic Adjustment:

The Demographic Adjustment shown in Exhibit 5 represents the expected change in the average member age from the base period to the projection period. Because of the lack of credible emerging experience as well as the uncertainty of the increasing mandate in 2016, we have assumed that the average age in the projection period is unchanged from the base period. However, due to slight difference in the average age between the Individual and Small group, there is a small change in the combined average age because of different growth in the Individual and Small Group members.

Embedded Pediatric Dental Adjustment:

KFHP is embedding pediatric dental benefits into its 2016 plans. KFHP will pay a dental provider a fixed per child per month capitation. Exhibit 14 shows the assumptions and development of the index rate adjustment factor to reflect the capitation on a per member per month basis by adjusting the index rate.

Trend:

The future trend numbers are based on actuarial judgment considering a mixture of expected industry trends, future fixed costs, and expected internalization of services. As an integrated health care provider, a large portion of KFHP's expenses are the costs associated with providing medical care through our centers. Therefore, the projected cost that is included in our total revenue requirement is largely based on budgeting. For traditional carriers, projected claims trends are developed to project expected costs. However, given KFHP's cost structure, KFHP's projected claims trends fall out of the development of projected budgeted costs. For 2014 to 2016, our projected total internal annualized medical expense trend for Small Group is 3.5% and is shown in Exhibit 6 of our filing.

Alternative AV Calculations

The AV calculator does not have an option for outpatient facility copay. To calculate the impact on the actuarial value of the plan for this benefit we used the alternate method described in 156.135 (b)(2). KFHP requested from a major actuarial consulting firm the national average allowed amount for outpatient facility costs in 2014. We have updated the national average allowed amount for the 2016 rate filing. To determine AVs for plans outpatient facility copays, we propose an OP Copay Converter to be used with the AV calculator. To create this converter, we compared the copay amount to the estimated average national OP facility allowed amount to calculate the implied coinsurance % for OP procedures. This coinsurance should only be applied to the OP facility cost and not the OP professional cost, which should be covered at 100%.

Plan designs have been changed to waive primary office visit copays for children younger than five. As the AV calculator does not have an adjustment to account for this benefit, we lowered the copay amount 16% by multiplying the actual copay by a factor of 0.84. For example, a \$20 primary office visit copay is entered as \$16.80. The 16% adjustment is based on KFHP data (as a proxy for standard population). Primary care utilization was divided between children under five and all other members. The data showed 16% of primary care visits were attributed to children under five. I certify the calculation to be actuarially sound.

AV Pricing Values

The rates for specific plans are calculated by multiplying plan factors times the index rate. The plan factors use industry standard data in a model from a national actuarial consulting firm, calibrated to KFHP experience to calculate the impact of the various cost share and plan elements for EHBs, including utilization copayment effect.

The reference plan used as the basis for the AV pricing values is a \$0 cost share plan valued using the same industry standard factors described above.

Exhibit 9 indicates the portion of the AV Pricing Value that is attributable to each of the allowable modifiers to the Index Rate. The plan factor shown in Exhibit 9 reflects both member cost shares and the resulting dampening of expected utilization due to those cost shares.

Network Adjustment

KFHP provides services to its members in its Signature network in its medical offices and externally with contracted providers. KFHP offers an expanded network of contracted non-KFHP physicians in its Select network. Rates for products with the Select network are adjusted by a factor of 1.05 for HMO to reflect the additional cost. This adjustment is consistent with the factor already filed in prior filings. For the POS plans, the factor is 1.04, reflecting steerage of 80% for Tier 1.

Age Factors

The age factor table used to develop age specific rates is the standard table provided by DISB.

Exhibit 12 shows the development of the age calibration factor. The development starts with the average age in the projection period from Exhibit 5. That age is rounded to the nearest age and the age factor is pulled from the DISB age curve. As described in the Actuarial Memorandum instructions, the ratio of the age factor for the nearest rounded age to the age factor for the average age in the projection period is the age calibration factor used in the rate development.

Non-EHB

An adjustment has been made to the base period allowed amount to remove the Non-EHB benefits from the Index Rate. This multiplier was calculated by summing the allowed amount for Non-EHB benefits in the base period and adding the adult preventive dental capitation and then dividing by total allowed.

Additional URRT Items

Membership Projections:

The total membership projection included across new plans in Section II of Worksheet 2 is consistent with KFHP's business plan. Detailed assumptions are presented and documented in Exhibit 7.1-7.3.

An assumption is made in Worksheet 2 as to the distribution of members by product based on KFHP's expected distribution of membership by metal level.

Terminated Plans:

The following non-grandfathered plans are included in the "Terminate Plans" column in Worksheet 2 of the URRT.

```
DC Added Choice POS Plan 1 ($5/$10)
DC Added Choice POS Plan 2 ($15/$25)
DC DHMO Plan 1 ($10/$20/$250 Ded - 90%)
DC DHMO Plan 2 ($15/$25/$500 Ded - 90%)
DC DHMO Plan 3 ($25/$35/$2,000 Ded - 80%)
DC DHMO Plan 4 ($25/$35/$1000 Ded - 80%)
DC Flex Choice Plan 1 (100/90/70 - $10-$20 OV)
DC Flex Choice Plan 2 (100/80/60 - $15-$25 OV)
DC Flex Choice Plan 3 (100/70/50 - $25-$35 OV)
DC Flex Choice Plan 4 (100/80/60 - $10-$25 OV)
DC Flex Choice Plan 4 (100/80/60 - $10-$25 OV)
DC HDHP Plan 1 ($1,250 Ded - 80%)
DC HDHP Plan 2 ($1,750 Ded - 70%)
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DC HDHP Plan 3 ($2,250 Ded – 70%)
DC HDHP Plan 4 ($1,250 Ded - 100%)
DC HDHP Plan 5 ($2,250 Ded - 100%)
DC HDHP Plan 8 ($2,800 Ded - 100%)
DC HMO Plan 1 ($5/$10/$0 IP/$0 Rx Ded)
DC HMO Plan 2 ($10/$20/$0 IP/$0 Rx Ded)
DC HMO Plan 3 ($15/$25/$0 IP/$0 Rx Ded)
DC HMO Plan 4 ($15/$30/$500 IP/$0 Rx Ded)
DC HMO Plan 5 ($20/$30/$250 IP/$0 Rx Ded)
DC HMO Plan 6 ($20/$40/20% IP/$0 Rx Ded)
DC HMO Plan 7 ($10/$10/$250 IP/$0 Rx Ded)
```

Warning Alert:

There are no warning alerts in Wk2 of the URRT

DC HMO Plan 8 (\$20/\$20/\$500 IP/\$0 Rx Ded)

Summary Rate Calculation

Exhibit 1 shows the development of the Market Adjusted Index Rate from the base period Medical Cost Data. The Plan Adjusted Index Rates are calculated using the Market Adjusted Index Rate and the allowable plan adjustment factors in Exhibit 9. The final 2016 Consumer Adjusted Premium Rates are developed by applying the age slope and age calibration to the Plan Adjusted Index Rates to generate age specific rates.

Exhibit Table of Contents:

The following exhibits are included in this filing:

- Exhibit 1 Market Adjusted Index Rate Calculation
- Exhibit 2 Allowed Claims Development
- Exhibit 3 –Non-EHB Adjustments
- Exhibit 4 Utilization Copayment Effect Adjustments
- Exhibit 5 Demographic Adjustment
- Exhibit 6 Trend Factor
- Exhibits 7.1 Risk Adjustment and Morbidity Development Combined Small and Individual
- Exhibits 7.2 Risk Adjustment and Morbidity Development Individual Line of Business
- Exhibits 7.3 Risk Adjustment and Morbidity Development Small Group Line of Business
- Exhibit 8 Administrative Expense
- Exhibit 9 Plan Adjusted Index Rates Development
- Exhibit 10 AV Calculator Values
- Exhibit 11 Quarterly Rate Factors
- Exhibit 12 Age Calibration
- Exhibit 13 Age Factors
- Exhibit 14 Pediatric Dental Adjustment Factor
- Appendix I-A 1st Quarter 2016 Signature Network Rate Sheet
- Appendix I-B 1st Quarter 2016 Select Network Rate Sheet
- Appendix II-A 2nd Quarter 2016 Signature Network Rate Sheet
- Appendix II-B 2nd Quarter 2016 Select Network Rate Sheet
- Appendix III-A 3rd Quarter 2016 Signature Network Rate Sheet
- Appendix III-B 3rd Quarter 2016 Select Network Rate Sheet
- Appendix IV-A 4th Quarter 2016 Signature Network Rate Sheet
- Appendix IV-B 4th Quarter 2016 Select Network Rate Sheet

Certification

This filing is in conformity with all applicable Actuarial Standards of Practice, including ASOP No. 8. To the best of my knowledge, the rating methodologies of Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. and the development of the Index Rate comply with the applicable District and Federal Statutes and Regulations (45 CFR 156.80(d)(1). The percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV were calculated in accordance with actuarial standards of practice. The index rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates. The rating methodologies produce premiums that are reasonable in relation to benefits being provided and the populations being covered and are based on sound and commonly accepted actuarial principles and are neither excessive nor deficient.

John Xu, FSA, MAAA Actuarial Manager

Kaiser Foundation Health Plan, Inc.

5/1/2015

Index Rate Development Summary Index Rate Calculation Exhibit 1

			<u>Source</u>
(1)	Base Period Allowed	\$321.92	Exhibit 2
(2)	Non-EHB Claims Adjustment	0.983	Exhibit 3
(3)	Experience Period Index Rate	\$316.58	(1) * (2)
(4)	Product/Network Adjustment	1.000	
(5)	Adjusted Base Period Allowed	\$316.58	(1) * (2)
(6)	Base Period Utilization Adjustment	1.096	Exhibit 4
(7)	Projection Period Utilization Adjustment	0.906	
(8)	Demographic Adjustment	0.997	Exhibit 5
(9)	Product/Network Moribidty Adjustment	1.000	
(10)	Additional EHB (including Ped Dental)	1.007	Exhibit 14
(10)	Annualized Trend	3.5%	Exhibit 6
(11)	Months of Trend	24	
(12)	Trend Factor	1.071	{1+(10)} ^{(11)/12}
(14)	Change in Morbidity	0.992	Exhibit 7
(15)	Contract Limit of 3 Children Factor	1.005	
(16)	Combined Projection Period Index Rate Prior to Separate Modifiers	336.41	(5) * (6) * (7) * (8) * (9) * (10) * (12) * (13) * (14) * (15)
(17)	Risk Adjustment	1.001	Exhibit 7
(18)	Exchange fee	1.000	
(19)	Reinsurance Premium	1.0067	
(20)	Market Adjusted Index Rate	\$338.87	(16) * (17) * (18) * (19)

Allowed Claims Development Exhibit 2

Current Pool	Current Plans	Member Months	Total
Individual	All	20,558	\$320.97
Small Group	All	34,232	\$322.49
Grand Total		54,790	\$321.92

Non-EHB Adjustments Exhibit 3

Current Pool	Current Plans	Member Months	Non-EHB PMPM
Individual	All	20,558	\$5.34
Small Group	All	34,232	\$5.34
Grand Total		54,790	\$5.34

Multplier to Remove Non-EHB [1 - (Non-EHB PMPM / Allowed PMPM)]	0.9834

Utilization Copayment Effect Adjustment Exhibit 4

Current Pool	Current Plan	Member Months	Allowed Amount	Copay Impact
Individual	All	20,558	\$320.97	0.900
Small Group	All	34,232	\$322.49	0.920
Grand Total		54,790	\$321.92	0.913

Adjustment Factor is the Inverse of the Total 1.096

Demographic Adjustment Exhibit 5

		Member Months	Average Age Factor ¹	Weighed Average Age ²
Experience Period	Individual	20558	1.0559	42.1
	Small Group	34232	0.9953	40.5
	Combined	54790	1.0180	41.1
Projection Period	Individual	31598	1.0559	42.1
	Small Group	68016	0.9953	40.5
	Combined	99614	1.0145	41.0
Demographic Factor			0.9965	

Average age factor based on CMS Age curve

Weighted Average Age = Interpolation on age curve of average age factor

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Exhibit 6 Trend Calculation

		2014 to 2016 Annualized
Category	Weight	Trend
Inpatient Hospital	20.6%	3.5%
Outpatient Hospital	16.1%	5.5%
Professional	46.2%	2.0%
Other	2.4%	3.5%
Prescription Drug	14.5%	6.0%
Capitation	0.3%	0.0%
Composite	100.0%	3.5%

Risk Adjustment and Morbidity Development Exhibit 7.1

Development of Risk Adjustment Factor Applied to Index Rate

1			
	<u>Small</u>	<u>Individual</u>	<u>Total</u>
Average Members	5,668	2,633	8,301
Adjustment for change in risk in Kaiser membership	100.0%	97.5%	99.21%
Adjustment for risk adjustment recoveries	100.0%	97.0%	

Risk Adjustment and Morbidity Development Exhibit 7.2

Current Risk Profile of Non-Grandfathered Kaiser members relative to current market

	CY 2013 Member Months	<u>Morbidity</u>
(1) Non-Grandfathered Guaranteed Issue	12	1.401
(2) Non-Grandfathered Medically Underwritten and ACA plans	20,530	1.050
(3) Dues Subsidy	16	1.274
(4) Total	20,558	1.050

Impact of projected membership to Kaiser risk profile in 2016 relative to current market

	Member Months	<u>Morbidity</u>
(5) Current Members [from (4) above]	20,558	1.050
(6) Gender to Unisex Selection Adjustment	20,530	1.000
(7) Total Mobidity Change	20,558	1.050
(8) New Entrants previoulsy uninsured	5,520	0.950
(9) Transfers from other carriers or other KP Segments	5,520	1.000
(10) Subtotal	31,598	1.024

Impact to Current Market from all new entrants in 2016

	Member Months	Risk Relativity
(11) Current Market	360,000	1.000
(12) Uninsured New Entrants	70,554	0.950
(13) Transfers from Group	70,554	1.000
(14) 2015 Market	501,108	0.993
(15) Kaiser risk relativity to 2016 market [$(10)/(14)$]		1.031
(16) Pent Up Demand Factor for New Entrants		1.000
(17) Adjustment for change in risk in Kaiser membership [(10) / (4)]		97.5% 97.0%
(18) Adjustment for risk adjustment recoveries [1/(15)]	mama] / (10) mama]]	, , , , , ,
(19) Adjustment for Pent Up Demand [{ (8) mems * (16) + (5) mems + (9) 1	mems } / (10) mems }]	100.0%
(20) Risk Adjustment fee 1.75/12/ Average Baf / Plan Index Rate		1.0006
(21) Adjustment for net risk adjustment [(18) * (20)]		97.0%

Risk Adjustment Factor Exhibit 7.3

Current Risk Profile of Non-Grandfathered Kaiser members relative to current market

	CY 2013 Member Months	<u>Morbidity</u>
(1) Non-Grandfathered ¹	34,212	1.050
Impact of projected membership to Kaiser	risk profile in 2015 relative to curi	ent market
	Members Months	<u>Morbidity</u>
(2) Current Members [from (4) above]	34,212	1.050
(3) New to Kaiser	3,048	1.000
(4) Subtotal	37,260	1.046
	Member Months	
(5) 2015 Market	568,490	1.000
(6) Kaiser risk relativity to 2015 market [(4) / ([5)]	1.046
Development of Risk Adjustment Factor Ap	oplied to Index Rate	
(7) Adjustment for change in risk in Kaiser member	ership [(4) / (1)]	99.6%
(8) Adjustment for risk adjustment recoveries [1 /	(6)]	95.6%
(9) Total Adjustment [(7) * (8)]		95.2%

¹ Current Kaiser portfolio is expected to be 1.05 to market.

Administrative Expense Factor - Small Group Exhibit 8

Retention Category	Percent of Retention
Claims Processing	1.72%
Customer Service	0.95%
Taxes	2.88%
Capital Contribution	1.50%
Member Communication Materials	0.54%
Open Enrollment	0.84%
Utilization Review	2.31%
Care Management	0.46%
Ad Hoc Reports	0.00%
Other - Community Service	1.13%
Corporate and Other Overhead	4.43%
Commissions	5.75%
Total	22.51%

Plan Adjusted Index Rates Exhibit 9

			Allowable Plan Modifiers			Plan Adjusted		
Plans	Metallic Level	Name	Plan Design	Network Factor	Utilization Copay Effect	Non-EHB	Admin	Index Rate
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	0.951	1.000	0.9225	1.0169	1.2905	430.58
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	0.895	1.000	0.9433	1.0169	1.2905	414.70
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	0.901	1.000	0.8913	1.0169	1.2905	394.41
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	0.862	1.000	0.9264	1.0169	1.2905	392.18
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	0.810	1.000	0.9043	1.0169	1.2905	359.67
6	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental	0.800	1.000	0.8993	1.0169	1.2905	353.08
7	Gold	KP DC Gold 1500/10/HSA/Dental/Ped Dental	0.774	1.000	0.8869	1.0169	1.2905	336.99
8	Silver	KP DC Silver 1250/35/Dental/Ped Dental	0.735	1.000	0.9022	1.0169	1.2905	325.79
9	Silver	KP DC Silver 2000/35/Dental/Ped Dental	0.699	1.000	0.8917	1.0169	1.2905	306.25
10	Silver	KP DC Silver 1500/30/HSA/Dental/Ped Dental	0.710	1.000	0.8784	1.0169	1.2905	306.15
11	Silver	KP DC Silver 2500/30/10%/HSA/Dental/Ped Dental	0.675	1.000	0.8577	1.0169	1.2905	284.41
12	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	0.604	1.000	0.8525	1.0169	1.2905	252.72
13	Bronze	KP DC Bronze 6000/30/10%/HSA/Dental/Ped Dental	0.592	1.000	0.8029	1.0169	1.2905	233.33
14	Bronze	KP DC Bronze 5000/20%/HSA/Dental/Ped Dental	0.588	1.000	0.8234	1.0169	1.2905	237.59
15	Bronze	KP DC Bronze 5000/20/HSA/Dental/Ped Dental	0.586	1.000	0.8234	1.0169	1.2905	236.91
16	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	0.690	1.000	0.8428	1.0169	1.2905	285.39
17	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	0.794	1.000	0.8857	1.0169	1.2905	345.21
18	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	0.927	1.000	0.9162	1.0169	1.2905	417.09
19	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	0.951	1.050	0.9225	1.0169	1.2905	452.10
20	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	0.895	1.050	0.9433	1.0169	1.2905	435.43
21	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	0.901	1.050	0.8913	1.0169	1.2905	414.13
22	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	0.862	1.050	0.9264	1.0169	1.2905	411.79
23	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	0.810	1.050	0.9043	1.0169	1.2905	377.66
24	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel	0.800	1.050	0.8993	1.0169	1.2905	370.73

AV Calculator Values Exhibit 10

Plans	Metallic Level	Name	AV Value
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	0.920
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	0.888
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	0.819
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	0.817
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	0.796
6	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental	0.816
7	Gold	KP DC Gold 1500/10/HSA/Dental/Ped Dental	0.784
8	Silver	KP DC Silver 1250/35/Dental/Ped Dental	0.714
9	Silver	KP DC Silver 2000/35/Dental/Ped Dental	0.703
10	Silver	KP DC Silver 1500/30/HSA/Dental/Ped Dental	0.716
11	Silver	KP DC Silver 2500/30/10%/HSA/Dental/Ped Dental	0.687
12	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	0.620
13	Bronze	KP DC Bronze 6000/30/10%/HSA/Dental/Ped Dental	0.609
14	Bronze	KP DC Bronze 5000/20%/HSA/Dental/Ped Dental	0.619
15	Bronze	KP DC Bronze 5000/20/HSA/Dental/Ped Dental	0.617
16	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	0.620
17	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	0.703
18	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	0.796
19	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	0.920
20	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	0.888
21	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	0.819
22	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	0.817
23	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	0.796
24	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel	0.816

Quarterly Rate Factors Exhibit 11

Plans	Metallic Level	Name	2Q 2016	3 Q 2016	4 Q 2016
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	1.009	1.017	1.026
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	1.009	1.017	1.026
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	1.009	1.017	1.026
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	1.009	1.017	1.026
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	1.009	1.017	1.026
6	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental	1.009	1.017	1.026
7	Gold	KP DC Gold 1500/10/HSA/Dental/Ped Dental	1.009	1.017	1.026
8	Silver	KP DC Silver 1250/35/Dental/Ped Dental	1.009	1.017	1.026
9	Silver	KP DC Silver 2000/35/Dental/Ped Dental	1.009	1.017	1.026
10	Silver	KP DC Silver 1500/30/HSA/Dental/Ped Dental	1.009	1.017	1.026
11	Silver	KP DC Silver 2500/30/10%/HSA/Dental/Ped Dental	1.009	1.017	1.026
12	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	1.009	1.017	1.026
13	Bronze	KP DC Bronze 6000/30/10%/HSA/Dental/Ped Dental	1.009	1.017	1.026
14	Bronze	KP DC Bronze 5000/20%/HSA/Dental/Ped Dental	1.009	1.017	1.026
15	Bronze	KP DC Bronze 5000/20/HSA/Dental/Ped Dental	1.009	1.017	1.026
16	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	1.009	1.017	1.026
17	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	1.009	1.017	1.026
18	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	1.009	1.017	1.026
19	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
20	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
21	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
22	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
23	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	1.009	1.017	1.026
24	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel	1.009	1.017	1.026

Age Calibration Factor Exhibit 12

	Weighted Averge Age	Age Factor
Average Age in the Projection Period	41.0	1.015
Nearest Rounded Age	41.0	1.013
Calibration Factor		0.999

Age Factors Exhibit 13

Age	Age Slope	Age Factor Indexed to Age 21
20	0.654	0.90
21	0.727	1.00
22	0.727	1.00
23	0.727	1.00
24	0.727	1.00
25	0.727	1.00
26	0.727	1.00
27	0.727	1.00
28	0.744	1.02
29	0.76	1.05
30	0.779	1.07
31	0.799	1.10
32	0.817	1.12
33	0.836	1.15
34	0.856	1.18
35	0.876	1.20
36	0.896	1.23
37	0.916	1.26
38	0.927	1.28
39	0.938	1.29
40	0.975	1.34
41	1.013	1.39
42	1.053	1.45
43	1.094	1.50
44	1.137	1.56
45	1.181	1.62
46	1.227	1.69
47	1.275	1.75
48	1.325	1.82
49	1.377	1.89
50	1.431	1.97
51	1.487	2.05
52	1.545	2.13
53	1.605	2.21
54	1.668	2.29
55	1.733	2.38
56	1.801	2.48
57	1.871	2.57
58	1.944	2.67
59	2.02	2.78
60	2.099	2.89
61	2.181	3.00
62	2.181	3.00
63	2.181	3.00
64+	2.181	3.00

Pediatric Dental Factor Development Exhibit 14

Current Pool	Current Plan	Member Months	Ped Dental Factor
Individual	All	20,558	1.002
Small Group	All	34,232	1.009
Grand Total		54,790	1.007

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective January 1, 2016 District of Columbia Small Group Exchange Appendix 1-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age		tal KP DC Platinum 500/20/Dental/Ped Dental	KP DC Gold 0/20/Dental Ped Dental	CP DC Gold 500/20/Dental/Ped De	nt KP DC Gold 1000/30/Dental/Ped Den	tal KP DC Gold 1350/0%/HSA/Dental Ped Dental			KP DC Silver 2000/35/Dental/Ped D			KP DC Bronze 4500/50/Dental/Ped Dental	KP DC Brouze 6600/30/10%/HSA/Dental/Ped Dental	KP DC Bronze 5000/20%/ISA/Dental/Ped Dent		DC Broom 4500/50/POS/Dontal/Ped De		KP DC Gold 1000/30/POS/Dental/Ped Dental
20 and Under	\$277.57	\$267.33	\$254.26	\$252.82	\$231.86	\$227.61	\$217.24	\$210.02	\$197.43	\$197.36	\$183.34	\$162.91	\$150.42	\$153.16	\$152.72	\$183.97	\$222.54	\$268.88
21	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
22	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
23	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
24	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
25	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
26	\$308.55 \$308.55	\$297.17 \$297.17	\$282.64 \$282.64	\$281.04 \$281.04	\$257.74 \$257.74	\$253.01 \$253.01	\$241.49 \$241.49	\$233.46 \$233.46	\$219.46 \$219.46	\$219.39 \$219.39	\$203.81 \$203.81	\$181.10 \$181.10	\$167.21 \$167.21	\$170.26 \$170.26	\$169.77 \$169.77	\$204.51 \$204.51	\$247.38 \$247.38	\$298.89 \$298.89
27	\$308.55	\$304.12	\$282.04 \$289.25	\$281.04 \$287.61	\$257.74	\$253.01 \$258.93	\$241.49 \$247.14	\$233.46 \$238.92	\$219.46 \$224.59	\$219.39 \$224.52	\$203.81 \$208.57	\$181.10	\$167.21 \$171.12	\$170.26	\$173.74	\$204.51 \$209.29	\$247.38 \$253.16	\$298.89 \$305.88
28	\$313.77	\$310.66	\$289.25 \$795.47	\$287.01	\$263.77	\$258.93 \$264.50	\$247.14 \$252.45	\$238.92	\$224.59 \$229.42	\$224.52 \$229.35	\$208.57 \$213.06	\$183.33 \$189.32	\$171.12 \$174.80	\$174.24	\$173.74 \$177.48	\$209.29	\$253.16 \$258.61	\$305.88 \$312.46
29	\$330.62	\$318.43	\$293.47 \$302.85	\$301.14	\$276.18	\$271.11	\$252.45 \$258.76	\$250.16	\$235.16	\$235.08	\$218.38	\$194.05	\$179.17	\$182.43	\$181.92	\$219.14	\$265.07	\$312.40 \$320.27
30	\$330.02	\$318.43 \$326.60	\$310.63	\$301.14	\$270.18	\$271.11	\$258.76 \$265.40	\$250.16	\$233.10 \$241.20	\$235.08 \$241.11	\$218.38 \$223.99	\$194.05	\$179.17 \$183.77	\$182.43 \$187.12	\$181.92 \$186.59	\$219.14 \$224.76	\$265.07 \$271.88	\$320.27 \$328.49
31	\$346.75	\$333.96	\$317.63	\$315.83	\$289.65	\$284.34	\$203.40 \$271.38	\$262.37	\$241.20	\$246.55	\$229.04	\$203.52	\$183.77	\$191.33	\$190.39	\$229.83	\$278.00	\$328.49 \$335.89
32	\$354.81	\$333.90 \$341.73	\$317.03 \$325.01	\$323.18	\$296.39	\$290.95	\$271.38 \$277.70	\$268.47	\$252.37	\$252.28	\$234.36	\$203.32 \$208.25	\$197.71	\$191.33	\$190.79	\$235.17	\$284.47	\$343.70
34	\$363.30	\$349.90	\$332.79	\$330.91	\$303.48	\$297.91	\$284.34	\$274.89	\$258.40	\$258.32	\$239.97	\$213.23	\$196.88	\$200.47	\$199.00	\$240.80	\$291.27	\$351.92
35	\$371.79	\$358.08	\$340.56	\$338.64	\$310.57	\$304.87	\$290.98	\$281.31	\$264.44	\$264.35	\$245.58	\$218.21	\$201.48	\$205.47	\$204.57	\$246.42	\$298.08	\$360.15
36	\$380.28	\$366.25	\$348.34	\$346.37	\$317.66	\$311.83	\$297.63	\$287.74	\$270.48	\$270.39	\$251.18	\$223.20	\$206.07	\$209.83	\$209.24	\$252.05	\$304.88	\$368.37
37	\$388.77	\$374.43	\$356.12	\$354.10	\$324.75	\$318.79	\$304.27	\$294.16	\$276.52	\$276.42	\$256.79	\$228.18	\$210.67	\$214.52	\$213.91	\$257.68	\$311.69	\$376.59
38	\$393.43	\$378.92	\$360.39	\$358.35	\$328.65	\$322.62	\$307.92	\$797.69	\$279.84	\$279.74	\$259.87	\$230.92	\$213.20	\$217.09	\$216.48	\$260.77	\$315.43	\$381.11
30	\$398.10	\$383.42	\$364.67	\$362.61	\$332.55	\$326.45	\$311.58	\$301.22	\$283.16	\$283.06	\$262.96	\$233.66	\$215.73	\$219.67	\$219.05	\$263.87	\$319.17	\$385.64
40	\$413.81	\$398.54	\$379.05	\$376.91	\$345.67	\$339.33	\$323.87	\$313.10	\$294.33	\$294.23	\$273.33	\$242.88	\$224.24	\$228.33	\$227.69	\$274.27	\$331.76	\$400.85
41	\$429.93	\$414.08	\$393.83	\$391.60	\$359.14	\$352.55	\$336.49	\$325.31	\$305.80	\$305.69	\$283.98	\$252.34	\$232.98	\$237.23	\$236.56	\$284.96	\$344.69	\$416.47
42	\$446.91	\$430.43	\$409.38	\$407.06	\$373.32	\$366.47	\$349.78	\$338.15	\$317.87	\$317.76	\$295.20	\$262.31	\$242.18	\$246.60	\$245.90	\$296.22	\$358.30	\$432.91
43	\$464.31	\$447.19	\$425.32	\$422.91	\$387.85	\$380.74	\$363.40	\$351.32	\$330.25	\$330.14	\$306.69	\$272.52	\$251.61	\$256.20	\$255.48	\$307.75	\$372.26	\$449.77
44	\$482.56	\$464.76	\$442.03	\$439.54	\$403.10	\$395.71	\$377.68	\$365.13	\$343.23	\$343.11	\$318.74	\$283.23	\$261.50	\$266.27	\$265.52	\$319.85	\$386.89	\$467.45
45	\$501.24	\$482.75	\$459.14	\$456.54	\$418.70	\$411.02	\$392.29	\$379.26	\$356.51	\$356.39	\$331.08	\$294.19	\$271.62	\$276.58	\$275.79	\$332.22	\$401.86	\$485.54
46	\$520.76	\$501.55	\$477.02	\$474.33	\$435.01	\$427.03	\$407.57	\$394.03	\$370.40	\$370.27	\$343.98	\$305.65	\$282.20	\$287.35	\$286.53	\$345.16	\$417.51	\$504.45
47	\$541.13	\$521.17	\$495.68	\$492.88	\$452.02	\$443.73	\$423.52	\$409.44	\$384.89	\$384.76	\$357.43	\$317.61	\$293.24	\$298.59	\$297.74	\$358.67	\$433.84	\$524.18
48	\$562.35	\$541.61	\$515.12	\$512.21	\$469.75	\$461.13	\$440.13	\$425.50	\$399.98	\$399.85	\$371.45	\$330.06	\$304.74	\$310.30	\$309.42	\$372.73	\$450.86	\$544.74
49	\$584.42	\$562.87	\$535.34	\$532.31	\$488.19	\$479.23	\$457.40	\$442.20	\$415.68	\$415.54	\$386.03	\$343.01	\$316.70	\$322.48	\$321.56	\$387.36	\$468.55	\$566.12
50	\$607.34	\$584.94	\$556.33	\$553.19	\$507.33	\$498.02	\$475.34	\$459.54	\$431.98	\$431.83	\$401.16	\$356.47	\$329.12	\$335.12	\$334.17	\$402.55	\$486.93	\$588.32
51	\$631.11	\$607.83	\$578.10	\$574.84	\$527.18	\$517.51	\$493.94	\$477.53	\$448.89	\$448.73	\$416.86	\$370.42	\$342.00	\$348.24	\$347.25	\$418.30	\$505.98	\$611.34
52	\$655.72	\$631.54	\$600.65	\$597.26	\$547.75	\$537.70	\$513.20	\$496.15	\$466.40	\$466.24	\$433.12	\$384.86	\$355.34	\$361.82	\$360.79	\$434.62	\$525.72	\$635.19
53	\$681.19	\$656.07	\$623.98	\$620.45	\$569.02	\$558.58	\$533.13	\$515.42	\$484.51	\$484.34	\$449.94	\$399.81	\$369.14	\$375.87	\$374.81	\$451.50	\$546.13	\$659.86
54	\$707.93	\$681.82	\$648.47	\$644.81	\$591.35	\$580.51	\$554.06	\$535.65	\$503.53	\$503.35	\$467.60	\$415.50	\$383.63	\$390.63	\$389.52	\$469.22	\$567.57	\$685.76
55	\$735.51	\$708.39	\$673.74	\$669.93	\$614.40	\$603.13	\$575.65	\$556.52	\$523.15	\$522.97	\$485.83	\$431.70	\$398.58	\$405.85	\$404.70	\$487.50	\$589.69	\$712.48
56	\$764.37	\$736.18	\$700.18	\$696.22	\$638.51	\$626.79	\$598.24	\$578.36	\$543.67	\$543.49	\$504.89	\$448.63	\$414.22	\$421.77	\$420.58	\$506.63	\$612.83	\$740.44
57	\$794.08	\$764.80	\$727.39	\$723.28	\$663.32	\$651.16	\$621.49	\$600.84	\$564.81	\$564.61	\$524.51	\$466.07	\$430.32	\$438.17	\$436.92	\$526.32	\$636.65	\$769.22
58	\$825.07	\$794.64	\$755.77	\$751.50	\$689.20	\$676.56	\$645.74	\$624.28	\$586.84	\$586.64	\$544.98	\$484.26	\$447.11	\$455.26	\$453.97	\$546.86	\$661.49	\$799.23
59	\$857.32	\$825.70	\$785.32	\$780.88	\$716.15	\$703.01	\$670.99	\$648.69	\$609.79	\$609.58	\$566.28	\$503.19	\$464.59	\$473.06	\$471.72	\$568.24	\$687.35	\$830.47
60	\$890.85	\$858.00	\$816.03	\$811.42	\$744.16	\$730.51	\$697.23	\$674.06	\$633.63	\$633.42	\$588.43	\$522.87	\$482.76	\$491.56	\$490.17	\$590.46	\$714.23	\$862.95
61	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66
62	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66
63	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66
64+	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66

Rates effective January 1, 2016 District of Columbia Small Group Exchange Appendix I-B

19 20 22 23 21 24 Gold Platinum Gold Gold Gold Platinum Age KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel KP DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$291.45 \$280.70 \$266.97 \$265.46 \$243.46 \$238.99 \$295.09 \$323.98 \$312.03 \$296.77 \$270.63 \$265.67 21 22 \$323.98 \$312.03 \$296.77 \$295.09 \$270.63 \$265.67 23 \$323.98 \$312.03 \$296,77 \$295.09 \$270.63 \$265.67 \$323.98 \$270.63 24 \$312.03 \$296.77 \$295.09 \$265.67 25 \$323.98 \$312.03 \$296.77 \$295.09 \$270.63 \$265.67 26 \$323.98 \$312.03 \$296,77 \$295.09 \$270.63 \$265.67 27 \$323.98 \$312.03 \$296.77 \$295.09 \$270.63 \$265.67 \$301.99 28 \$331.55 \$319.33 \$303.71 \$276.96 \$271.88 \$338.68 \$326.19 \$310.24 \$308.49 \$282.91 \$277.72 29 \$347.15 \$334.35 \$318.00 \$316.20 \$289.99 \$284.67 30 \$342.93 \$326.16 \$324.32 \$297.43 31 \$356.06 \$291.98 \$364.09 \$350.66 \$333.51 \$331.62 \$304.13 \$298.55 32 33 \$372.55 \$358.81 \$341.26 \$339.33 \$311.21 \$305.50 34 \$381.47 \$367.40 \$349.43 \$347.45 \$318.65 \$312.81 \$390.38 \$375.98 \$357.59 \$355.57 \$326.10 35 \$320.11 36 \$399.29 \$384.57 \$365.76 \$363.69 \$333.54 \$327.42 37 \$408.20 \$393.15 \$373.92 \$371.81 \$340.99 \$334.73 38 \$413.11 \$397.87 \$378.41 \$376.27 \$345.08 \$338.75 39 \$418.01 \$402.59 \$382.90 \$380.74 \$349.18 \$342.77 40 \$434.50 \$418.47 \$398.01 \$395.76 \$362.95 \$356.29 \$451.43 \$434.78 \$413.52 \$411.18 \$377.09 41 \$370.18 42 \$469.26 \$451.95 \$429.85 \$427.42 \$391.98 \$384.79 \$487.53 \$446.58 \$407.25 43 \$469.55 \$444.06 \$399.78 44 \$506.69 \$488.00 \$464.14 \$461.51 \$423.25 \$415.49 \$482.10 \$479.37 \$439.63 45 \$526.30 \$506.89 \$431.57 \$526.63 \$500.87 \$498.04 \$456.76 46 \$546.80 \$448.38 \$568.19 \$547.23 \$520.47 \$517.53 \$474.63 \$465.92 47 \$590.47 \$568.69 \$540.88 \$537.82 \$493.24 48 \$484.19 \$562.11 \$558.93 \$512.60 \$503.19 49 \$613.64 \$591.01 50 \$637.71 \$614.19 \$584.15 \$580.85 \$532.70 \$522.93 51 \$662.66 \$638.22 \$607.01 \$603.58 \$553.54 \$543.39 52 \$688.51 \$663.12 \$630.69 \$627.12 \$575.13 \$564.58 53 \$715.25 \$688.87 \$655.18 \$651.47 \$597.47 \$586.51 54 \$743.32 \$715.91 \$680.90 \$677.05 \$620.92 \$609.53 55 \$772.29 \$743.81 \$707.43 \$703.43 \$645.12 \$633.28 56 \$802.59 \$772.99 \$735.19 \$731.03 \$670.43 \$658.13 57 \$833.79 \$803.04 \$763.76 \$759.44 \$696.49 \$683.71 \$793.56 \$789.08 \$723.66 58 \$866.32 \$834.37 \$710.39 59 \$900.19 \$866.99 \$824.59 \$819.92 \$751.96 \$738.16 60 \$935.39 \$900.90 \$856.83 \$851.99 \$781.36 \$767.03 \$971.94 \$936.09 \$890.31 \$885.27 \$811.89 \$797.00 61 \$885.27 62 \$971.94 \$936.09 \$890.31 \$811.89 \$797.00 \$885.27 63 \$971.94 \$936.09 \$890.31 \$811.89 \$797.00 \$971.94 \$890.31 \$885.27 \$811.89 64+ \$936.09 \$797.00

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective April 1, 2016 District of Columbia Small Group Exchange Appendix II-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	P DC Platinum 0/20/Dental/Ped Den P	P DC Platinum 500/20/Dental Ped Den	KP DC Gold @2@Dental/Ped Dental	DC Gold 500/20/Dental/Ped D	P DC Gold 1000/30/Dental/Ped D	en P DC Gold 1350/0%/HSA/Dental/Per	d Den KP DC Gold 1500/10/HSA/Dental/Ped Dental	P DC Silver 1250/35/Dental/Ped De	mP DC Silver 2000/35/Dental/Ped Den	P DC Silver 1500/30/HSA/Dental/Ped Den	KP DC Silver 2500/30/10%/HSA/Dental/Ped Dent	P DC Bronze 4500/50/Dental/Ped De	DC Bronze 6000/30/10%/HSA/Dental/Ped	De P DC Bronze 5000/20%/HSA/Dental/Ped I	es P DC Bronze 5000/20/HSA/Dental/Ped Der	CP DC Bronze 4500/50/POS/Dental/Ped Dent	KP DC Silver 2000/35/POS/Dental/Pod Dental	KP DC Gold 1000/30/POS/Dental/Ped Dental
20 and Under	\$279.95	\$269.63	\$256.44	\$254.99	\$233.85	\$229.57	\$219.11	\$211.82	\$199.13	\$199.06	\$184.91	\$164.31	\$151.71	\$154.48	\$154.03	\$185.55	\$224.45	\$271.19
21	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
22	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
23	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
24	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
25	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
26	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
27	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
28	\$318.48	\$306.73	\$291.73	\$290.08	\$266.04	\$261.15	\$249.26	\$240.97	\$226.52	\$226.45	\$210.36	\$186.92	\$172.59	\$175.74	\$175.23	\$211.09	\$255.33	\$308.51
29	\$325.33	\$313.33	\$298.01	\$296.32	\$271.75	\$266.77	\$254.62	\$246.16	\$231.39	\$231.32	\$214.89	\$190.95	\$176.30	\$179.51	\$179.00	\$215.63	\$260.83	\$315.14
30	\$333.46	\$321.17	\$305.45	\$303.73	\$278.55	\$273.44	\$260.98	\$252.31	\$237.18	\$237.10	\$220.26	\$195.72	\$180.71	\$184.00	\$183.48	\$221.02	\$267.35	\$323.02
31	\$342.02	\$329.41	\$313.30	\$311.52	\$285.70	\$280.46	\$267.68	\$258.79	\$243.27	\$243.18	\$225.91	\$200.74	\$185.35	\$188.73	\$188.19	\$226.69	\$274.22	\$331.31
32	\$349.73	\$336.83	\$320.36	\$318.54	\$292.14	\$286.78	\$273.71	\$264.62	\$248.75	\$248.67	\$231.01	\$205.27	\$189.52	\$192.97	\$192.43	\$231.80	\$280.39	\$338.78
33	\$357.86	\$344.67	\$327.80	\$325.96	\$298.94	\$293.45	\$280.09	\$270.78	\$254.54	\$254.45	\$236.37	\$210.04	\$193.93	\$197.46	\$196.91	\$237.19	\$286.91	\$346.65
34	\$366.42	\$352.91	\$335.65	\$333.75	\$306.09	\$300.47	\$286.78	\$277.25	\$260.62	\$260.54	\$242.03	\$215.06	\$198.57	\$202.19	\$201.62	\$242.87	\$293.77	\$354.94
35	\$374.98	\$361.16	\$343.49	\$341.55	\$313.24	\$307.49	\$293.48	\$283.73	\$266.71	\$266.62	\$247.69	\$220.08	\$203.21	\$206.91	\$206.33	\$248.54	\$300.64	\$363.24
36	\$383.55	\$369.40	\$351.33	\$349.35	\$320.39	\$314.51	\$300.19	\$290.21	\$272.80	\$272.71	\$253.34	\$225.12	\$207.84	\$211.63	\$211.04	\$254.22	\$307.50	\$371.53
37	\$392.11	\$377.65	\$359.18	\$357.14	\$327.54	\$321.53	\$306.88	\$296.69	\$278.90	\$278.79	\$259.00	\$230.14	\$212.48	\$216.36	\$215.75	\$259.89	\$314.37	\$379.82
38	\$396.81	\$382.17	\$363.49	\$361.43	\$331.47	\$325.39	\$310.56	\$300.25	\$282.24	\$282.14	\$262.10	\$232.90	\$215.03	\$218.95	\$218.34	\$263.01	\$318.14	\$384.38
39	\$401.52	\$386.71	\$367.80	\$365.72	\$335.41	\$329.25	\$314.26	\$303.81	\$285.59	\$285.49	\$265.22	\$235.67	\$217.58	\$221.56	\$220.93	\$266.14	\$321.91	\$388.95
40	\$417.36	\$401.96	\$382.31	\$380.15	\$348.64	\$342.24	\$326.65	\$315.79	\$296.86	\$296.76	\$275.68	\$244.97	\$226.17	\$230.29	\$229.65	\$276.63	\$334.61	\$404.29
41	\$433.62	\$417.64	\$397.21	\$394.96	\$362.22	\$355.58	\$339.38	\$328.10	\$308.43	\$308.32	\$286.42	\$254.51	\$234.98	\$239.27	\$238.59	\$287.41	\$347.65	\$420.05
42	\$450.75	\$434.13	\$412.90	\$410.56	\$376.53	\$369.62	\$352.78	\$341.05	\$320.60	\$320.49	\$297.74	\$264.56	\$244.26	\$248.72	\$248.01	\$298.76	\$361.38	\$436.63
43	\$468.30	\$451.03	\$428.97	\$426.54	\$391.18	\$384.01	\$366.52	\$354.34	\$333.09	\$332.98	\$309.32	\$274.86	\$253.77	\$258.40	\$257.67	\$310.39	\$375.46	\$453.63
44	\$486.71	\$468.75	\$445.83	\$443.32	\$406.56	\$399.11	\$380.92	\$368.27	\$346.18	\$346.06	\$321.48	\$285.66	\$263.75	\$268.56	\$267.80	\$322.60	\$390.21	\$471.47
45	\$505.55	\$486.90	\$463.08	\$460.46	\$422.30	\$414.55	\$395.66	\$382.52	\$359.57	\$359.45	\$333.92	\$296.72	\$273.95	\$278.96	\$278.16	\$335.07	\$405.31	\$489.71
46	\$525.23	\$505.86	\$481.12	\$478.40	\$438.75	\$430.70	\$411.07	\$397.41	\$373.58	\$373.45	\$346.93	\$308.28	\$284.62	\$289.82	\$288.99	\$348.12	\$421.10	\$508.78
47	\$545.78	\$525.65	\$499.94	\$497.11	\$455.90	\$447.54	\$427.16	\$412.96	\$388.20	\$388.06	\$360.50	\$320.34	\$295.76	\$301.15	\$300.30	\$361.75	\$437.57	\$528.68
48	\$567.18	\$546.26	\$519.54	\$516.61	\$473.79	\$465.09	\$443.91	\$429.15	\$403.42	\$403.28	\$374.64	\$332.90	\$307.36	\$312.97	\$312.08	\$375.93	\$454.73	\$549.42
49	\$589.44	\$567.70	\$539.94	\$536.88	\$492.38	\$483.35	\$461.33	\$446.00	\$419.25	\$419.11	\$389.35	\$345.96	\$319.42	\$325.25	\$324.32	\$390.69	\$472.57	\$570.98
50	\$612.56	\$589.96	\$561.11	\$557.94	\$511.69	\$502.30	\$479.42	\$463.49	\$435.69	\$435.54	\$404.61	\$359.53	\$331.95	\$338.00	\$337.04	\$406.01	\$491.11	\$593.37
51	\$636.53	\$613.05	\$583.07	\$579.78	\$531.71	\$521.96	\$498.18	\$481.63	\$452.75	\$452.58	\$420.44	\$373.60	\$344.94	\$351.23	\$350.23	\$421.89	\$510.33	\$616.59
52	\$661.35	\$636.96	\$605.81	\$602.39	\$552.46	\$542.32	\$517.61	\$500.41	\$470.41	\$470.24	\$436.84	\$388.17	\$358.39	\$364.93	\$363.89	\$438.35	\$530.24	\$640.65
53	\$687.04	\$661.71	\$629.34	\$625.78	\$573.91	\$563.38	\$537.71	\$519.85	\$488.67	\$488.50	\$453.80	\$403.24	\$372.31	\$379.10	\$378.03	\$455.38	\$550.82	\$665.53
54	\$714.01	\$687.68	\$654.04	\$650.35	\$596.43	\$585.50	\$558.82	\$540.25	\$507.86	\$507.67	\$471.62	\$419.07	\$386.93	\$393.99	\$392.87	\$473.25	\$572.45	\$691.65
55	\$741.83	\$714.47	\$679.53	\$675.68	\$619.68	\$608.31	\$580.59	\$561.30	\$527.64	\$527.46	\$490.00	\$435.41	\$402.00	\$409.34	\$408.18	\$491.69	\$594.76	\$718.60
56	\$770.94	\$742.50	\$706.19	\$702.20	\$643.99	\$632.17	\$603.38	\$583.33	\$548.34	\$548.16	\$509.23	\$452.48	\$417.78	\$425.39	\$424.19	\$510.98	\$618.09	\$746.80
57	\$800.90	\$771.37	\$733.64	\$729.49	\$669.02	\$656.75	\$626.83	\$606.00	\$569.66	\$569.46	\$529.02	\$470.07	\$434.02	\$441.93	\$440.67	\$530.84	\$642.12	\$775.83
58	\$832.16	\$801.47	\$762.26	\$757.96	\$695.12	\$682.37	\$651.29	\$629.64	\$591.88	\$591.68	\$549.66	\$488.42	\$450.95	\$459.17	\$457.87	\$551.56	\$667.17	\$806.10
59	\$864.68	\$832.79	\$792.07	\$787.59	\$722.30	\$709.05	\$676.75	\$654.26	\$615.03	\$614.82	\$571.14	\$507.51	\$468.58	\$477.12	\$475.77	\$573.12	\$693.25	\$837.60
60	\$898.50	\$865.37	\$823.04	\$818.39	\$750.55	\$736.78	\$703.22	\$679.85	\$639.07	\$638.86	\$593.48	\$527.36	\$486.91	\$495.78	\$494.38	\$595.53	\$720.37	\$870.36
61	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36
62	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36
63	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36
64+	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36

Rates effective April 1, 2016 District of Columbia Small Group Exchange Appendix II-B

19 20 22 23 21 24 Gold Gold Gold Gold Platinum Platinum KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel P DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$293.95 \$283.11 \$269.26 \$267.74 \$245.55 \$241.04 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 21 22 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 23 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 \$272.95 24 \$326.76 \$314.71 \$299.32 \$297.62 \$267.95 25 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 26 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 27 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 \$334.40 \$322.07 \$306.32 \$274.22 28 \$304.58 \$279.34 \$341.59 \$328.99 \$312.90 \$285.34 29 \$311.14 \$280.11 \$292.48 30 \$350.13 \$337.22 \$320.73 \$318.92 \$287.12 \$359.12 \$345.88 \$328.96 \$327.11 31 \$299.98 \$294.49 32 \$367.22 \$353.67 \$336.37 \$334.47 \$306.74 \$301.11 33 \$375.75 \$361.89 \$344.19 \$342.24 \$313.88 \$308.12 34 \$384.75 \$370.56 \$352.43 \$350.43 \$321.39 \$315.50 35 \$393,73 \$379.21 \$360.66 \$358.62 \$328.90 \$322.86 36 \$402.72 \$387.87 \$368.90 \$366.81 \$336.41 \$330.23 37 \$411.71 \$396.53 \$377.13 \$375.00 \$343.92 \$337.61 38 \$416.66 \$401.29 \$381.66 \$379.50 \$348.04 \$341.66 39 \$421.60 \$406.05 \$386.19 \$384.01 \$352.18 \$345.71 40 \$438.23 \$422.06 \$401.43 \$399.16 \$366.07 \$359.35 \$455.31 \$438.51 \$417.07 \$373.36 41 \$414.71 \$380.33 42 \$473.29 \$455.83 \$433.54 \$431.09 \$395.35 \$388.10 43 \$491.72 \$473.58 \$450.42 \$447.87 \$410.75 \$403.21 44 \$511.04 \$492.19 \$468.13 \$465.47 \$426.89 \$419.06 \$530.82 \$443.41 45 \$511.24 \$486.24 \$483.49 \$435.28 \$551.50 \$531.15 \$505.17 \$502.32 \$460.68 46 \$452.23 \$573.07 \$551.93 \$524.94 \$521.98 \$478.71 47 \$469.92 \$595.54 \$573.57 \$545.53 \$542.44 \$497.48 \$488.35 48 \$618.91 \$596.09 \$566.94 \$563.73 \$517.00 49 \$507.51 50 \$643.19 \$619.47 \$589.17 \$585.84 \$537.28 \$527.42 51 \$668.35 \$643.70 \$612.22 \$608.76 \$558.29 \$548.06 52 \$694.42 \$668.82 \$636.11 \$632.51 \$580.07 \$569.43 53 \$721.39 \$694.79 \$660.81 \$657.07 \$602.60 \$591.55 54 \$749.70 \$722.06 \$686.75 \$682.87 \$626.25 \$614.77 55 \$778.92 \$750.20 \$713.51 \$709.47 \$650.66 \$638.72 56 \$809.48 \$779.63 \$741.51 \$737.31 \$676.19 \$663.78 57 \$840.95 \$809.94 \$770.32 \$765.96 \$702.47 \$689.58 \$841.54 \$800.38 \$873.76 \$795.86 \$729.88 \$716.49 58 59 \$907.92 \$874.44 \$831.67 \$826.96 \$758.42 \$744.50 \$943.42 60 \$908.64 \$864.19 \$859.31 \$788.07 \$773.62 \$980.28 \$944.13 \$897.96 \$892.86 \$818.85 \$803.85 61 62 \$980.28 \$944.13 \$897.96 \$892.86 \$818.85 \$803.85 63 \$980.28 \$944.13 \$897.96 \$892.86 \$818.85 \$803.85

\$897.96

\$892.86

\$818.85

\$803.85

\$980.28

64+

\$944.13

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective July 1, 2016 District of Columbia Small Group Exchange Appendix III-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age		CP DC Platinum 500/20/Dental/Ped Dent	KP DC Gold 0/20/Dental/Ped Dental	DC Gold 500/20/Dental/Ped De							KP DC Silver 2500/30/10%/HSA/Dental/Ped Dent							
20 and Under		\$271.94	\$258.65	\$257.18	\$235.86	\$231.54	\$220.99	\$213.64	\$200.84	\$200.77	\$186.50	\$165.72	\$153.02	\$155.80	\$155.35	\$187.14	\$226.38	\$273.52
21	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
22	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
23	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
24	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
25	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
26	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
27	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
28	\$321.22	\$309.37	\$294.24	\$292.57	\$268.32	\$263.40	\$251.40	\$243.04	\$228.46	\$228.39	\$212.17	\$188.53	\$174.07	\$177.25	\$176.74	\$212.90	\$257.53	\$311.16
29	\$328.13	\$316.02	\$300.57	\$298.87	\$274.09	\$269.06	\$256.81	\$248.27	\$233.38	\$233.31	\$216.74	\$192.59	\$177.82	\$181.05	\$180.54	\$217.48	\$263.07	\$317.85
30	\$336.32	\$323.92	\$308.08	\$306.34	\$280.95	\$275.79	\$263.22	\$254.48	\$239.22	\$239.14	\$222.15	\$197.40	\$182.26	\$185.58	\$185.06	\$222.92	\$269.64	\$325.80
31	\$344.96	\$332.23	\$315.99	\$314.20	\$288.16	\$282.87	\$269.98	\$261.02	\$245.36	\$245.27	\$227.85	\$202.46	\$186.94	\$190.35	\$189.81	\$228.64	\$276.57	\$334.16
32	\$352.73	\$339.72	\$323.11	\$321.28	\$294.65	\$289.25	\$276.06	\$266.90	\$250.89	\$250.80	\$232.99	\$207.03	\$191.15	\$194.63	\$194.08	\$233.80	\$282.80	\$341.69
33	\$360.93	\$347.63	\$330.62	\$328.76	\$301.50	\$295.97	\$282.49	\$273.10	\$256.72	\$256.63	\$238.40	\$211.84	\$195.60	\$199.16	\$198.60	\$239.23	\$289.38	\$349.63
34	\$369.57	\$355.94	\$338.53	\$336.62	\$308.72	\$303.05	\$289.25	\$279.63	\$262.86	\$262.78	\$244.11	\$216.91	\$200.28	\$203.93	\$203.35	\$244.95	\$296.30	\$357.99
35	\$378.20	\$364.26	\$346.44	\$344.48	\$315.93	\$310.13	\$296.00	\$286.16	\$269.00	\$268.91	\$249.82	\$221.97	\$204.96	\$208.69	\$208.10	\$250.67	\$303.22	\$366.36
36	\$386.84	\$372.57	\$354.35	\$352.35	\$323.14	\$317.21	\$302.77	\$292.70	\$275.15	\$275.06	\$255.51	\$227.05	\$209.63	\$213.45	\$212.85	\$256.40	\$310.14	\$374.73
37	\$395.48	\$380.89	\$362.26	\$360.21	\$330.35	\$324.29	\$309.52	\$299.24	\$281.29	\$281.19	\$261.22	\$232.12	\$214.30	\$218.22	\$217.60	\$262.13	\$317.07	\$383.09
38	\$400.22	\$385.46	\$366.61	\$364.53	\$334.32	\$328.19	\$313.23	\$302.83	\$284.67	\$284.57	\$264.35	\$234.90	\$216.88	\$220.84	\$220.21	\$265.27	\$320.87	\$387.69
39	\$404.97	\$390.04	\$370.96	\$368.87	\$338.29	\$332.08	\$316.96	\$306.42	\$288.05	\$287.94	\$267.50	\$237.69	\$219.45	\$223.46	\$222.83	\$268.42	\$324.68	\$392.29
40	\$420.95	\$405.42	\$385.59	\$383.41	\$351.63	\$345.18	\$329.46	\$318.50	\$299.41	\$299.31	\$278.05	\$247.07	\$228.11	\$232.27	\$231.62	\$279.00	\$337.48	\$407.77
41	\$437.35	\$421.22	\$400.62	\$398.36	\$365.34	\$358.63	\$342.30	\$330.92	\$311.08	\$310.96	\$288.88	\$256.69	\$237.00	\$241.32	\$240.64	\$289.88	\$350.64	\$423.66
42	\$454.62	\$437.86	\$416.44	\$414.08	\$379.76	\$372.79	\$355.81	\$343.98	\$323.35	\$323.24	\$300.29	\$266.84	\$246.36	\$250.85	\$250.14	\$301.33	\$364.48	\$440.38
43	\$472.32	\$454.91	\$432.66	\$430.21	\$394.54	\$387.31	\$369.67	\$357.38	\$335.95	\$335.84	\$311.98	\$277.22	\$255.95	\$260.62	\$259.89	\$313.06	\$378.68	\$457.53
44	\$490.89	\$472.78	\$449.66	\$447.12	\$410.05	\$402.54	\$384.20	\$371.43	\$349.15	\$349.03	\$324.24	\$288.12	\$266.01	\$270.86	\$270.10	\$325.37	\$393.57	\$475.52
45	\$509.89	\$491.08	\$467.06	\$464.42	\$425.92	\$418.11	\$399.06	\$385.80	\$362.66	\$362.54	\$336.79	\$299.27	\$276.31	\$281.35	\$280.55	\$337.95	\$408.79	\$493.92
46	\$529.74	\$510.20	\$485.25	\$482.51	\$442.52	\$434.40	\$414.60	\$400.83	\$376.79	\$376.66	\$349.91	\$310.92	\$287.07	\$292.31	\$291.47	\$351.12	\$424.71	\$513.15
4/	\$550.47 \$572.05	\$530.16 \$550.95	\$504.23	\$501.38	\$459.82	\$451.39	\$430.83 \$447.72	\$416.50	\$391.53	\$391.40 \$406.75	\$363.60	\$323.09 \$335.75	\$298.30	\$303.74	\$302.88	\$364.86 \$379.16	\$441.33	\$533.22 \$554.14
48			\$524.01	\$521.05	\$477.85	\$469.09		\$432.84	\$406.88		\$377.86		\$310.00	\$315.65	\$314.76 \$327.11		\$458.64	\$554.14 \$575.89
49	\$594.50 \$617.82	\$572.58 \$595.03	\$544.58 \$565.93	\$541.49 \$562.73	\$496.61 \$516.08	\$487.50 \$506.61	\$465.29 \$483.54	\$449.83 \$467.47	\$422.85 \$439.43	\$422.71 \$439.28	\$392.69 \$408.08	\$348.93 \$362.62	\$322.16 \$334.80	\$328.04 \$340.90	\$327.11 \$339.94	\$394.04 \$409.50	\$476.63 \$495.33	\$575.89 \$598.47
	0011102	00,000	40.000		40.000	40.0000	4 100-0 1		0.103110	\$103.MG	Q 100000	0.0000	400.100	40.100.0	400000	4100100		
51	\$642.00 \$667.03	\$618.32	\$588.07 \$611.01	\$584.76 \$607.56	\$536.28 \$557.20	\$526.44 \$546.98	\$502.46 \$522.05	\$485.77 \$504.71	\$456.63 \$474.45	\$456.47	\$424.05 \$440.59	\$376.81 \$391.50	\$347.90 \$361.47	\$354.25 \$368.06	\$353.24 \$367.01	\$425.52	\$514.71 \$534.79	\$621.89 \$646.15
52	\$667.03 \$692.94	\$642.44 \$667.39	\$611.01 \$634.75	\$607.56	400.100	40.000	\$522.05 \$542.33	\$504.71 \$524.31		\$474.28 \$492.70	\$440.59 \$457.70	000.000		\$368.06 \$382.35	\$367.01 \$381.28	\$442.12 \$459.29	\$534.79 \$555.55	\$646.15 \$671.24
5.5	\$692.94 \$720.14	\$667.39 \$693.58	\$634.75 \$659.66	\$631.15 \$655.94	\$578.84 \$601.55	\$568.22 \$590.53	\$542.33 \$563.62	\$524.31 \$544.89	\$492.87 \$512.22	\$492.70 \$512.03	\$457.70 \$475.67	\$406.71 \$422.67	\$375.51 \$390.25	\$382.35 \$397.37	\$381.28 \$396.24	\$459.29 \$477.32	\$555.55 \$577.36	\$671.24 \$697.59
54	\$720.14 \$748.20	\$693.58 \$720.61	\$659.66 \$685.36	\$655.94 \$681.49	0.00100	\$590.53 \$613.54	\$563.62 \$585.58	\$544.89 \$566.12		\$512.03 \$531.99	4.1.0.0.			\$397.37	\$396.24 \$411.68	\$477.32	\$5//.36 \$599.86	\$697.59 \$724.77
55	\$748.20 \$777.56	\$720.61 \$748.88			\$625.00 \$649.53	\$613.54 \$637.60	\$585.58 \$608.56	\$566.12 \$588.34	\$532.18 \$553.05		\$494.21	\$439.15 \$456.37	\$405.46 \$421.37		\$411.68 \$427.84	\$495.91 \$515.37	4000000	
56	0111100	0.7.10100	\$712.26	\$708.23	4013100	4001100	400000			\$552.87	\$513.60	0.0000	0.000	\$429.05		40.40.0	\$623.40	\$753.21
57	\$807.78	\$778.00 \$808.35	\$739.94 \$768.81	\$735.76	\$674.76	\$662.39 \$688.23	\$632.21 \$656.88	\$611.21 \$635.05	\$574.55 \$596.96	\$574.35	\$533.56	\$474.11	\$437.74	\$445.73	\$444.46	\$535.40 \$556.30	\$647.63	\$782.49 \$813.02
58	\$839.31 \$872.11	0.000000	\$768.81 \$798.87	\$764.47 \$794.35	\$701.09		\$656.88 \$682.57	0.00-0.100	40.0000	\$596.76	\$554.38 \$576.05	\$492.62	\$454.82	\$463.11 \$481.22	\$461.80 \$479.86	400000	\$672.90	\$813.02 \$844.80
59	\$872.11 \$906.22	\$839.95 \$872.80	\$798.87 \$830.11		\$728.51 \$757.00	\$715.14	\$682.57 \$709.26	\$659.88 \$685.60	\$620.31 \$644.56	\$620.10 \$644.35	\$576.05 \$598.58	\$511.87 \$531.89	\$472.61 \$491.09	\$481.22 \$500.04	\$479.86	\$578.04 \$600.65	\$699.21 \$726.55	\$844.80 \$877.84
0.0	0.00000	0.01.000		\$825.42	4.0	\$743.11	4100100	3003.07	3044.50	401100	40,000	000000	0.0.000	40.000.	3470.03	3000.00		
61	\$941.61	\$906.89 \$906.89	\$862.54	\$857.67 \$857.67	\$786.56 \$786.56	\$772.13	\$736.97	\$712.46	\$669.74 \$669.74	\$669.52	\$621.97	\$552.66	\$510.27	\$519.58	\$518.10	\$624.12	\$754.93	\$912.13 \$912.13
62	\$941.61	0,700103	\$862.54 \$862.54	\$857.67	4.0000	\$772.13	\$736.97 \$736.97	\$712.46 \$712.46		\$669.52	\$621.97 \$621.97	\$552.66	\$510.27	\$519.58	\$518.10 \$518.10	\$624.12 \$624.12	\$754.93	\$912.13
63	\$941.61 \$941.61	\$906.89 \$906.89	\$862.54 \$862.54	\$857.67 \$857.67	\$786.56 \$786.56	\$772.13 \$772.13	\$736.97 \$736.97	\$712.46 \$712.46	\$669.74 \$669.74	\$669.52 \$669.52	\$621.97 \$621.97	\$552.66 \$552.66	\$510.27 \$510.27	\$519.58 \$519.58	\$518.10 \$518.10	\$624.12 \$624.12	\$754.93 \$754.93	\$912.13 \$912.13
64+	3941.61	3500.89	3862.54	\$857.67	378b.5b	\$1/2.13	\$136.91	3/12.46	5009.74	\$009.52	\$021.97	3252.66	\$510.27	\$319.58	\$218.10	\$024.12	\$754.93	\$912.13

Rates effective July 1, 2016 District of Columbia Small Group Exchange Appendix III-B

19 20 22 23 21 24 Gold Gold Gold Platinum Gold Platinum KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel P DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$296.48 \$285.54 \$271.58 \$270.04 \$247.66 \$243.11 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 21 22 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 23 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 \$300.18 \$275.30 24 \$329.57 \$317.41 \$301.89 \$270.25 25 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 26 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 27 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 \$337.27 \$308.95 \$307.20 28 \$324.84 \$281.74 \$276.57 \$344.52 \$331.82 \$315.59 \$287.79 29 \$313.81 \$282.51 30 \$353.14 \$340.12 \$323.49 \$321.66 \$294.99 \$289.58 \$362.20 \$348.85 \$329.92 \$302.56 31 \$331.79 \$297.02 32 \$370.37 \$356.71 \$339.26 \$337.34 \$309.38 \$303.70 33 \$378.98 \$365.00 \$347.15 \$345.18 \$316.58 \$310.77 34 \$388.05 \$373.74 \$355.46 \$353,44 \$324.15 \$318.21 \$382.47 \$325.63 35 \$397.12 \$363.76 \$361.70 \$331.73 36 \$406.18 \$391.21 \$372.07 \$369.96 \$339.29 \$333.07 37 \$415.24 \$399,93 \$380.37 \$378.22 \$346.87 \$340.51 38 \$420.24 \$404.73 \$384.94 \$382.76 \$351.03 \$344.59 39 \$425.22 \$409.54 \$389.51 \$387.31 \$355.20 \$348.68 40 \$442.00 \$425.69 \$404.88 \$402.59 \$369.21 \$362,44 \$459.22 \$442.28 \$420.65 \$383.60 41 \$418.27 \$376.57 42 \$477.36 \$459.75 \$437.27 \$434.79 \$398.74 \$391.43 43 \$495.94 \$477.65 \$454.28 \$451.72 \$414.28 \$406.68 44 \$515.43 \$496.42 \$472.15 \$469.47 \$430.55 \$422.66 \$535.38 \$447.22 45 \$515.64 \$490.42 \$487.64 \$439.02 \$535.72 \$509.51 \$506.63 \$464.64 46 \$556.23 \$456.12 \$577.99 \$556.67 \$529.45 \$526.46 \$482.82 47 \$473.96 \$578.50 \$550.21 \$547.10 \$501.75 48 \$600.66 \$492.54 \$624.23 \$571.81 \$568.57 49 \$601.21 \$521.44 \$511.87 50 \$648.71 \$594.23 \$590.87 \$541.89 \$531.95 \$624.79 51 \$674.09 \$649.23 \$617.48 \$613.99 \$563.09 \$552,77 52 \$700.39 \$674.56 \$641.57 \$637.94 \$585.05 \$574.32 53 \$727.59 \$700.76 \$666.48 \$662.71 \$607.78 \$596.63 54 \$756.14 \$728.26 \$692.65 \$688.73 \$631.63 \$620.05 55 \$785.61 \$756.64 \$719.64 \$715.57 \$656.25 \$644.21 56 \$816.44 \$786.33 \$747.87 \$743.64 \$682.00 \$669.48 57 \$848.18 \$816.90 \$776.94 \$772.54 \$708.51 \$695.51 \$848.77 \$807.25 \$881.27 \$802.69 \$736.15 \$722.65 58 59 \$915.72 \$881.95 \$838.82 \$834.07 \$764.93 \$750.90 60 \$951.53 \$916.44 \$871.61 \$866.69 \$794.84 \$780.26 \$988.71 \$952.23 \$905.67 \$900.54 \$825.90 \$810.75 61 \$952.23 62 \$988.71 \$905.67 \$900.54 \$825.90 \$810.75 63 \$988.71 \$952.23 \$905.67 \$900.54 \$825.90 \$810.75

\$905.67

\$900.54

\$825.90

\$810.75

\$988.71

64+

\$952.23

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective October 1, 2016 District of Columbia Small Group Exchange Appendix IV-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Γ	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	DC Platinum 0/20/Dental/Ped D	Den P DC Platinum 500/20/Dental/Ped Den	KP DC Gold 0/20/Dental/Ped Dental	DC Gold 500/20/Dental/Ped D	P DC Gold 1000/30/Dental/Ped Den	P DC Gold 1350/0%/HSA/Dental/Ped D	ten KP DC Gold 1500/10/HSA/Dental/Ped Dental P	DC Silver 1250/35/Dental/Ped I	en P DC Silver 2000/35/Dental/Ped E	en P DC Säver 1500/30/HSA/Dental/Ped Den	KP DC Silver 2500/30/10%/HSA/Dental/Ped Denta	P DC Bronze 4500/50/Dental/Ped	Den DC Bronze 6000/30/10%/HSA/Dental/Ped De	DC Bronze 5000/20%/HSA/Dental/Ped Do	P DC Bronze 5000/20/HSA/Dental/Ped Dent	KP DC Bronze 4500/50/POS/Dental/Ped Dental	KP DC Silver 2000/35/POS/Dental/Ped Dental	KP DC Gold 1000/30/POS/Dental/Ped Dental
20 and Under	\$284.78	\$274.28	\$260.87	\$259.39	\$237.89	\$233.53	\$222.89	\$215.48	\$202.56	\$202.49	\$188.11	\$167.14	\$154.33	\$157.14	\$156.69	\$188.75	\$228.32	\$275.87
21	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
22	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
23	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
24	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
25	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
26	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
27	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
28	\$323.98	\$312.02	\$296.77	\$295.09	\$270.63	\$265.66	\$253.56	\$245.13	\$230.43	\$230.36	\$213.99	\$190.15	\$175.57	\$178.77	\$178.26	\$214.73	\$259.74	\$313.83
29	\$330.94	\$318.73	\$303.15	\$301.44	\$276.44	\$271.37	\$259.01	\$250.40	\$235.38	\$235.31	\$218.60	\$194.24	\$179.34	\$182.61	\$182.09	\$219.35	\$265.33	\$320.58
30	\$339.21	\$326.71	\$310.72	\$308.97	\$283.36	\$278.16	\$265.49	\$256.66	\$241.27	\$241.19	\$224.06	\$199.09	\$183.83	\$187.17	\$186.65	\$224.84	\$271.96	\$328.59
31	\$347.92	\$335.09	\$318.70	\$316.90	\$290.63	\$285.30	\$272.30	\$263.26	\$247.47	\$247.38	\$229.81	\$204.20	\$188.55	\$191.98	\$191.44	\$230.60	\$278.95	\$337.03
32	\$355.76	\$342.64	\$325.89	\$324.04	\$297.18	\$291.73	\$278.43	\$269.19	\$253.04	\$252.96	\$234.99	\$208.81	\$192.79	\$196.30	\$195.75	\$235.80	\$285.23	\$344.62
33	\$364.03	\$350.61	\$333.46	\$331.58	\$304.09	\$298.51	\$284.92	\$275.45	\$258.93	\$258.84	\$240.45	\$213.66	\$197.28	\$200.87	\$200.30	\$241.28	\$291.86	\$352.63
34	\$372.74	\$358.99	\$341.44	\$339.51	\$311.37	\$305.65	\$291.73	\$282.03	\$265.12	\$265.03	\$246.21	\$218.77	\$202.00	\$205.68	\$205.10	\$247.06	\$298.84	\$361.07
35	\$381.45	\$367.39	\$349.41	\$347.44	\$318.64	\$312.79	\$298.54	\$288.62	\$271.31	\$271.22	\$251.96	\$223.88	\$206.72	\$210.48	\$209.89	\$252.82	\$305.83	\$369.51
36	\$390.16	\$375.77	\$357.39	\$355.37	\$325.92	\$319.93	\$305.37	\$295.22	\$277.51	\$277.42	\$257.71	\$229.00	\$211.43	\$215.28	\$214.68	\$258.60	\$312.80	\$377.94
37	\$398.87	\$384.16	\$365.38	\$363.30	\$333.19	\$327.08	\$312.18	\$301.81	\$283.71	\$283.60	\$263.46	\$234.11	\$216.15	\$220.10	\$219.47	\$264.38	\$319.79	\$386.38
38	\$403.66	\$388.77	\$369.76	\$367.66	\$337.19	\$331.01	\$315.92	\$305.43	\$287.11	\$287.01	\$266.62	\$236.92	\$218.74	\$222.73	\$222.11	\$267.55	\$323.63	\$391.02
39	\$408.45	\$393.39	\$374.15	\$372.03	\$341.19	\$334.93	\$319.68	\$309.05	\$290.52	\$290.42	\$269.79	\$239.73	\$221.34	\$225.38	\$224.74	\$270.73	\$327.47	\$395.66
40	\$424.57	\$408.90	\$388.90	\$386.71	\$354.65	\$348.15	\$332.29	\$321.24	\$301.98	\$301.88	\$280.43	\$249.19	\$230.07	\$234.26	\$233.61	\$281.40	\$340.38	\$411.27
41	\$441.10	\$424.84	\$404.07	\$401.78	\$368.47	\$361.71	\$345.24	\$333.77	\$313.75	\$313.64	\$291.36	\$258.90	\$239.04	\$243.40	\$242.71	\$292.37	\$353.65	\$427.29
42	\$458.53	\$441.62	\$420.02	\$417.64	\$383.02	\$375.99	\$358.87	\$346.94	\$326.13	\$326.02	\$302.87	\$269.13	\$248.47	\$253.01	\$252.29	\$303.92	\$367.61	\$444.16
43	\$476.38	\$458.81	\$436.37	\$433.90	\$397.93	\$390.64	\$372.85	\$360.45	\$338.83	\$338.72	\$314.66	\$279.60	\$258.15	\$262.86	\$262.12	\$315.75	\$381.94	\$461.46
44	\$495.10	\$476.84	\$453.52	\$450.96	\$413.58	\$405.99	\$387.50	\$374.62	\$352.15	\$352.03	\$327.02	\$290.59	\$268.30	\$273.19	\$272.42	\$328.16	\$396.95	\$479.60
45	\$514.27	\$495.30	\$471.07	\$468.41	\$429.58	\$421.70	\$402.49	\$389.12	\$365.78	\$365.65	\$339.69	\$301.84	\$278.68	\$283.77	\$282.96	\$340.85	\$412.30	\$498.16
46	\$534.30	\$514.59	\$489.42	\$486.66	\$446.32	\$438.13	\$418.16	\$404.27	\$380.03	\$379.89	\$352.92	\$313.59	\$289.53	\$294.82	\$293.98	\$354.13	\$428.36	\$517.56
47	\$555.19	\$534.72	\$508.56	\$505.69	\$463.77	\$455.26	\$434.53	\$420.08	\$394.89	\$394.76	\$366.72	\$325.87	\$300.86	\$306.35	\$305.48	\$367.99	\$445.12	\$537.80
48	\$576.97	\$555.69	\$528.51	\$525.52	\$481.96	\$473.12	\$451.57	\$436.56	\$410.38	\$410.24	\$381.10	\$338.64	\$312.66	\$318.37	\$317.46	\$382.42	\$462.58	\$558.90
49	\$599.61	\$577.50	\$549.25	\$546.15	\$500.88	\$491.69	\$469.29	\$453.69	\$426.48	\$426.34	\$396.06	\$351.93	\$324.93	\$330.86	\$329.92	\$397.43	\$480.73	\$580.83
50	\$623.13	\$600.14	\$570.79	\$567.57	\$520.52	\$510.96	\$487.69	\$471.48	\$443.21	\$443.05	\$411.59	\$365.74	\$337.67	\$343.83	\$342.86	\$413.01	\$499.59	\$603.61
51	\$647.51	\$623.63	\$593.13	\$589.78	\$540.88	\$530.96	\$506.78	\$489.94	\$460.56	\$460.39	\$427.69	\$380.05	\$350.89	\$357.29	\$356.28	\$429.17	\$519.13	\$627.23
52	\$672.76	\$647.95	\$616.26	\$612.78	\$561.99	\$551.68	\$526.54	\$509.05	\$478.52	\$478.36	\$444.38	\$394.86	\$364.58	\$371.22	\$370.17	\$445.92	\$539.38	\$651.70
53	\$698.89	\$673.12	\$640.20	\$636.58	\$583.81	\$573.10	\$546.99	\$528.82	\$497.10	\$496.93	\$461.63	\$410.20	\$378.73	\$385.64	\$384.55	\$463.24	\$560.32	\$677.01
54	\$726.33	\$699.54	\$665.32	\$661.57	\$606.72	\$595.60	\$568.46	\$549.57	\$516.62	\$516.43	\$479.75	\$426.30	\$393.60	\$400.78	\$399.64	\$481.42	\$582.32	\$703.58
55	\$754.63	\$726.80	\$691.25	\$687.34	\$630.37	\$618.81	\$590.61	\$570.98	\$536.75	\$536.56	\$498.46	\$442.92	\$408.94	\$416.40	\$415.22	\$500.17	\$605.02	\$731.00
56	\$784.24	\$755.31	\$718.38	\$714.32	\$655.11	\$643.08	\$613.79	\$593.39	\$557.80	\$557.62	\$518.01	\$460.29	\$424.99	\$432.73	\$431.51	\$519.80	\$628.76	\$759.68
57	\$814.72	\$784.68	\$746.30	\$742.08	\$680.56	\$668.08	\$637.64	\$616.46	\$579.49	\$579.28	\$538.14	\$478.18	\$441.50	\$449.56	\$448.28	\$540.00	\$653.20	\$789.21
58	\$846.51	\$815.29	\$775.41	\$771.03	\$707.11	\$694.14	\$662.52	\$640.51	\$602.09	\$601.89	\$559.14	\$496.85	\$458.73	\$467.09	\$465.77	\$561.07	\$678.68	\$820.00
59	\$879.60	\$847.16	\$805.73	\$801.18	\$734.76	\$721.28	\$688.43	\$665.55	\$625.64	\$625.42	\$581.00	\$516.27	\$476.67	\$485.36	\$483.98	\$583.01	\$705.22	\$852.05
60	\$914.00	\$880.30	\$837.24	\$832.51	\$763.50	\$749.50	\$715.35	\$691.58	\$650.10	\$649.88	\$603.72	\$536.46	\$495.31	\$504.34	\$502.91	\$605.81	\$732.79	\$885.38
61	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97
62	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97
63	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97
64+	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97

Rates effective October 1, 2016 District of Columbia Small Group Exchange Appendix IV-B

19 20 22 23 21 24 Gold Gold Platinum Gold Gold Platinum KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel P DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$299.03 \$288.00 \$273.91 \$272.36 \$249.79 \$245.20 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 21 22 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 23 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 \$332.40 24 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 25 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 26 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 27 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 \$327.63 28 \$340.17 \$311.60 \$309.84 \$284.16 \$278.95 \$347.48 \$334.67 \$318.30 \$316.51 \$290.26 29 \$284.94 30 \$356.17 \$343.04 \$326.27 \$324.42 \$297.53 \$292.07 \$365.31 \$334.64 \$332.75 31 \$351.84 \$305.16 \$299.57 32 \$373.55 \$359.77 \$342.18 \$340.24 \$312.03 \$306.31 33 \$382.23 \$368.14 \$350.13 \$348.15 \$319.30 \$313.44 34 \$391.38 \$376.95 \$358.51 \$356.48 \$326.93 \$320.94 \$385.75 35 \$400.53 \$366.88 \$364.81 \$334.58 \$328.43 36 \$409.67 \$394.57 \$375.27 \$373.14 \$342.21 \$335.93 37 \$418.81 \$403.37 \$383.64 \$381.47 \$349.85 \$343.43 38 \$423.85 \$408.21 \$388.25 \$386.05 \$354.05 \$347.55 39 \$428.87 \$413.05 \$392.85 \$390.64 \$358.26 \$351.68 40 \$445.79 \$429.35 \$408.35 \$406.05 \$372.38 \$365.55 \$424.27 41 \$463.16 \$446.08 \$421.87 \$386.89 \$379.80 42 \$481.46 \$463.70 \$441.02 \$438.53 \$402.17 \$394.79 43 \$500.20 \$481.75 \$458.19 \$455.60 \$417.83 \$410.17 44 \$519.86 \$500.68 \$476.20 \$473.51 \$434.25 \$426.29 \$539.98 45 \$520.06 \$494.63 \$491.83 \$451.06 \$442.79 \$540.32 \$513.89 \$510.98 \$468.63 46 \$561.01 \$460.03 \$582.96 \$561.45 \$534.00 \$530.98 \$486.97 47 \$478.03 \$605.82 \$583.47 \$554.94 48 \$551.80 \$506.06 \$496.77 \$606.37 \$576.72 \$573.46 \$525.92 49 \$629.59 \$516.27 50 \$654.28 \$630.15 \$599.33 \$595.95 \$546.55 \$536.52 51 \$679.88 \$654.81 \$622.79 \$619.27 \$567.93 \$557.51 52 \$706.41 \$680.36 \$647.08 \$643,42 \$590.08 \$579.25 53 \$733.84 \$706.77 \$672.21 \$668.40 \$613.00 \$601.75 54 \$762.64 \$734.52 \$698.60 \$694.65 \$637.06 \$625.37 55 \$792.36 \$763.14 \$725.82 \$721.71 \$661.89 \$649.74 56 \$823.45 \$793.08 \$754.30 \$750.03 \$687.86 \$675.24 57 \$855.46 \$823.91 \$783.61 \$779.18 \$714.59 \$701.48 \$742.47 \$888.84 \$856.06 \$814.19 \$809.59 \$728.85 58 59 \$923.59 \$889.52 \$846.02 \$841.23 \$771.50 \$757.35 60 \$959.70 \$924.32 \$879.10 \$874.13 \$801.67 \$786.97 \$997.20 \$960.42 \$913.44 \$908.28 \$832.98 \$817.71 61 62 \$997.20 \$960.42 \$913.44 \$908.28 \$832.98 \$817.71 63 \$997.20 \$960.42 \$913.44 \$908.28 \$832.98 \$817.71

\$913.44

\$832.98

\$817.71

\$908.28

\$997.20

64+

\$960.42

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

District of Columbia

2016 Small Group Rate Filing HIOS Issuer ID 94506

HIOS Product ID 94506DC035, 94506DC036

Form Numbers DC-SG-HMO-FACE(01-14)HIX, DC-SG-POS-FACE(01-14)HIX, EOC-COVER (1-05), DC-SG-WRAP(01-16)HIX, KFHP-EOC COVER (01/10)DC, DCLG-ALL-TOC(1-05), DC-SG-SEC1(01-16)HIX, DC-SG-SEC2(01-15)HIX, DC-SG-SEC3(01-16)HIX, DC-SG-SEC4(01-14)HIX, DC-SG-SEC5(01-16)HIX. DC-SG-SEC6(01-15)HIX. DC-SG-SEC7(01-14)HIX. DC-SG-APPX-DEF(01-16)HIX. DC-SG-PLATINUM-0-20-DENTAL-HMO-COST(01-16)HIX, DC-SG-GOLD-0-20-DENTAL-HMO-COST(01-16)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-COST(01-16)HIX, DC-SG-GOLD-500-20-DENTAL-DHMO-COST(01-16)HIX. DC-SG-GOLD-1000-30-DENTAL-DHMO-COST(01-16)HIX. DC-SG-SILVER-1250-35-DENTAL-DHMO-COST(01-16)HIX, DC-SG-SILVER-2000-35-DENTAL-DHMO-COST(01-16)HIX, DC-SG-BRONZE-4500-50-DENTAL-DHMO-COST(01-16)HIX, DC-SG-GOLD-1350-0%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-GOLD-1500-10-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-SILVER-1500-30-20%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-SILVER-2500-30-10%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-BRONZE-5000-20%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-BRONZE-5000-20-30%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-BRONZE-6000-30-10%-HSA-DENTAL-HDHP-COST(01-16)HIX, DC-SG-BRONZE-4500-50-POS-DENTAL-COST(01-16)HIX, DC-SG-GOLD-1000-30-POS-DENTAL-COST(01-16)HIX, DC-SG-SILVER-2000-35-POS-DENTAL-COST(01-16)HIX, DC-SG-PLATINUM-0-20-DENTAL-HMO-RX(01-16)HIX, DC-SG-GOLD-0-20-DENTAL-HMO-RX(01-16)HIX, DC-SG-PLATINUM-500-20-DENTAL-DHMO-RX(01-16)HIX, DC-SG-GOLD-500-20-DENTAL-DHMO-RX(01-16)HIX, DC-SG-GOLD-1000-30-DENTAL-DHMO-RX(01-16)HIX, DC-SG-SILVER-1250-35-DENTAL-DHMO-RX(01-16)HIX, DC-SG-SILVER-2000-35-DENTAL-DHMO-RX(01-16)HIX, DC-SG-BRONZE-4500-50-DENTAL-DHMO-RX(01-16)HIX, DC-SG-GOLD-1350-0%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-GOLD-1500-10-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-SILVER-1500-30-20%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-SILVER-2500-30-10%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-BRONZE-5000-20%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-BRONZE-5000-20-30%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-BRONZE-6000-30-10%-HSA-DENTAL-HDHP-RX(01-16)HIX, DC-SG-BRONZE-4500-50-POS-DENTAL-RX(01-16)HIX , DC-SG-GOLD-1000-30-POS-DENTAL-RX(01-16)HIX, DC-SG-SILVER-2000-35-POS-DENTAL-RX(01-16), DC-SG-DENTAL-ADULT(01-14)HIX, DC-SG-PED-DENTAL(01-15)HIX, DC-POS-AMEND(01-14)HIX

Actuarial Memorandum

I, John Xu, an Actuary for Kaiser Foundation Health Plan, Inc. (KFHP) am a member of the American Academy of Actuaries. I meet the qualification standards for certifying Regulatory Filings for Rates and Financial Projections for Health Plans. This Actuarial Certification applies to the attached filing for an approval of premium rates for Small Groups sold on the exchange. This actuarial memorandum documents the assumptions and sources of data pertaining to the development of Kaiser premium rates effective January 2016. It is intended to comply with the requirements outlined in the DC Health Benefit Exchange Authority's 2016 Carrier Reference Manual (April 2015, Version 1). It is not intended for any other purpose.

This rate filing applies to forms that are open to new sales and renewals. This filing does not cover grandfathered products that existed prior to March 23, 2010.

KFHP is an HMO company and offers traditional HMO copayment plans covering medical and pharmacy claims expenses. Kaiser also offers Deductible and High Deductible plans, some of which are HSA qualified and a limited number of Point of Service type plans. For purposes of regulation, these are all HMO products.

KFHP will market products to the Individual and Small Group markets through Direct Sales channels and Broker arrangements, as well as on the District of Columbia Marketplace (aka the Exchange). The products are guaranteed issue and guaranteed renewable.

I am the primary contact for this filing. My telephone number is 301-816-6349 and my email address is John.A.Xu@kp.org. Please also include Sheila Schroer on correspondence related to this filing, her email address is Sheila.A.Schroer@kp.org.

Proposed Rate Increases

The percent increase in the Market Adjusted Index Rate from 2015 to 2016 is -4.9%. The drivers of that change are shown in the table below, which contains all the components of the Market Adjusted Index Rate calculation. The numbers shown are the ratio of the 2016 to the 2015 factor, so a 1.000 indicates no impact on the rate change.

Source of Change	2016/2015
Based Period Experience	0.962
Base Period Utilization Copay	1.007
Pricing Trend	1.000
Morbidity Adjustment	0.945
Risk Adjustment Recoveries	1.047
Pent Up Demand	1.000
Reinsurance Recoveries	1.000
Reinsurance Premium	0.996
Average Age Impact	1.001
Additional EHB	0.995
Exchange Fee	1.000
Fixed Cost Adjustment	1.000
Total Market Adjusted Index Rate Change	95.1%

Plan level rate changes are shown in row 25 of Worksheet II in the URRT.

Experience Period Claims

Base period data:

The Revenue Requirement for 2016 for the new ACA plans is developed by accumulating medical and administrative expenses for essential health benefits (EHB) for non-grandfathered business in the Child-Only, Conversion, Dues Subsidy, ACA plans and Small Group lines of business incurred in 2014 including the incurred but not reported (IBNR) estimates for external expense. Allowed cost data from internal costs, fee for service claims, and prescription drug claims are trended to 2016. Allowed claims for internal services are allocated costs for medical services delivered within our integrated delivery system while allowed claims for external expenses are calculated as incurred plus member cost sharing.

Capitations:

KHFP has contracted with a dental provider to provide dental care to KFHP members. KFHP pays the provider a fixed capitation of \$1.15 PMPM to cover adult preventative. The \$1.15 PMPM is part of the base period allowed amount, shown in Exhibit 2. It is then removed as a non-Essential Health Benefit in Exhibit 3. Finally, this benefit is added back as part of the non-EHB adjustment in Exhibit 10.

Incurred Estimates on External Expense:

A common reserve tool developed and maintained by KFHP Actuarial Services is used to set KFHP's IBNR reserves. KFHP's common reserve tool uses historical claim lag averages to project anticipated future payments. IBNR levels are set for line of business and service line breakouts. Note that the IBNR applies only to KFHP's external allowed costs. Most of KFHP's expenses are internal fixed costs, which are allocated and lag in reporting is immaterial.

The completion factors used to complete the base period external claims are taken from KFHP's overall commercial line of business by type of service. The claims are incurred in 2014 and paid through 1/31/2015.

Premium:

Premium was captured for calendar year 2014 for all members in the base period single (combined Small Group and Individual) pool. There were no MLR rebates for these members in this period. For Dues Subsidy members, the whole premium was captured and not just the portion paid by the member.

Part I Unified Rate Review Template

Base Period Experience:

The base period experience in Worksheet 1 Section I and in Worksheet 2 Section III is the combined experience of the Small Group and Individual markets. The Index Rate of the Experience Period in cell G17 is taken from Exhibit 1 line 3. It is the per member per month allowed claims less non-essential health benefits from the base period. Therefore, it represents the average age of the members in the risk pool. The Index Rate for the Projection period, discussed below, is taken from Exhibit 1 Line 16.

Benefit Categories:

The benefit categories in Section II of Worksheet I are mapped based on type of service and place of treatment codes. For example:

Benefit Category	Services
Inpatient Hospital	Inpatient Facility, Inpatient Visits (Rounding), Inpatient Surgery - Non Maternity, Maternity

Outpatient Hospital	Outpatient Facility, Emergency/Urgent Care, Hospital Outpatient Other Professional, Outpatient Surgery
Professional	Diagnostic Services, Office Visits, Cardiovascular, Chemotherapy/Pharmacy, Dialysis, PT/OT/ST
Other Medical	Other Services
Capitation	Adult Preventive Dental
Prescription Drug	Pharmacy

Morbidity and Other Adjustments:

The morbidity adjustments in Section II Worksheet 1 are developed from row (14) in the attached Exhibit 1 and reflect the morbidity in the single risk pool (Small Group and Individual combined) of our expected 2016 membership. The development of these factors along with the documentation of these assumptions is included in Exhibit 7.1-7.3.

The "Other" adjustment in Section II Worksheet I is an adjustment to reflect that family contracts are limited to three dependents in 2016.

Also included in the "Other" adjustment is the base period utilization copay effect from Exhibit 4. The adjustment is necessary to convert the base period experience from an average plan allowed amount to the allowed amount for the reference plan. "Other" also includes additional EHB benefits in the projection period.

All the factors discussed above in the Morbidity and Other Adjustments are based on Small Group and Individual experience combined.

Paid to Allowed Ratio:

The Paid to Allowed Average Factor in the Projection Period in Section III of Worksheet I is an average plan factor for the plans listed in Worksheet II. It represents the change from the average benefit plan allowed amount to the average paid amount across the 2016 plans based on weightings in Worksheet 2 of the URRT.

The factor in cell v33 in Worksheet I of the URRT is calculated by weighting the plan design factors in Exhibit 10 by the projected members and allowed costs by plans in rows 81 and 100, respectively, of Worksheet II of the URRT.

Estimated Average Annual Premium per Policy:

The estimated average annual premium per policy based on the URRT and SERFF data included in the filing is \$8.013.86.

Risk Adjustment

Exhibit 7.1-7.3 documents the development of the Risk Adjustment index rate factor. The index rate is adjusted to reflect the expected change in morbidity of the members covered by these plans relative to the members in the base period data. It is also adjusted to reflect the risk adjustment receipts anticipated in the rating period based on the expect risk profile relative to the market of the Small Group line only based on DISB guidance.

Assumptions are documented regarding the current relative morbidity of KFHP's population along with the expected morbidity of the future market relative to KFHP. Growth assumptions for the market as a whole and KFHP specifically are used to calculate KFHP's 2016 expected relative morbidity to the market. This value is used to determine the expected risk adjustment impact to the market adjusted index rate.

Reinsurance

The reinsurance contribution for the Federal Reinsurance Program is included in the rate build up and shown as a factor in Exhibit 1, line (19).

Administrative Expense

Retention includes broker commissions, administrative expenses and capital contribution. Commissions are paid to Brokers of Record. The capital contribution is an amount needed to maintain and expand Kaiser's medical center facilities where members receive the majority of their health care. As a group model HMO, Kaiser owns a significant portion of the health care delivery system. In other health care delivery models, capital contributions are included in fee for service payments, whereas for Kaiser these are funded through premium rates.

Quarterly Rate Factors

Exhibit 11 contains the quarterly rate factors that will be applied to base rates for 2nd, 3rd and 4th 2016 effective dates. These adjustments are based on an annual trend of 3.5%. Kaiser reserves the right to amend this filing with new quarterly factors based on emerging experience and other subsequent events.

In order for the Index Rate in the Projection Period in Wk1 Section III of the URRT to reflect the average quarterly rate, a weighted average trend adjustment based on the assumed distribution of renewals throughout the year has been development.

	Q1	Q2	Q3	Q4	
Members	2,382	529	794	1,962	
Trend	3.5%	3.5%	3.5%	3.5%	Proj Index Adj
Months	24	27	30	33	for Small Group
	1.072	1.081	1.091	1.100	1.014

Profit and Risk Margin

As mentioned above, the capital contribution of 1.5%, shown in Exhibit 9, is an amount to maintain and expand Kaiser's medical center facilities where members receive the majority of their healthcare.

Taxes and Fees

Administrative expense has been adjusted to reflect the PCORI tax and the insurer tax that will apply in 2016. The amount is shown as percent in Exhibit 9.

Projected Loss Ratio

Based on a target admin percentage of 22.5%, which includes a 1.5% capital contribution margin, we anticipate an MLR based on federally prescribed methodology to be at least 80.4%. The MLR would be expected to be higher due to the required adjustments to both claims and premium in the prescribed methodology.

Market Adjusted Index Rate

The development of the index rate is summarized in Exhibit 1 and is based on combined experience of non-grandfathered Individual and Small Group experience as described above. The following factors along with Risk Adjustment described above have been considered in the development and are documented below.

Utilization copayment effect adjustment:

Allowed claims are grossed up for anticipated changes in the average utilization of services due to average cost sharing requirements in the base period. Member cost sharing results in lower utilization and, thus, lower allowed costs, than would otherwise occur in a zero cost share environment. An estimate based on industry standard factors has been made at the plan level to adjust our base period data to what would have been expected in a zero cost share environment in order to normalize for the utilization copayment effect. These adjustments are documented in Exhibit 4.

Demographic Adjustment:

The Demographic Adjustment shown in Exhibit 5 represents the expected change in the average member age from the base period to the projection period. Because of the lack of credible emerging experience as well as the uncertainty of the increasing mandate in 2016, we have assumed that the average age in the projection period is unchanged from the base period. However, due to slight difference in the average age between the Individual and Small group, there is a small change in the combined average age because of different growth in the Individual and Small Group members.

Embedded Pediatric Dental Adjustment:

KFHP is embedding pediatric dental benefits into its 2016 plans. KFHP will pay a dental provider a fixed per child per month capitation. Exhibit 14 shows the assumptions and development of the index rate adjustment factor to reflect the capitation on a per member per month basis by adjusting the index rate.

Trend:

The future trend numbers are based on actuarial judgment considering a mixture of expected industry trends, future fixed costs, and expected internalization of services. As an integrated health care provider, a large portion of KFHP's expenses are the costs associated with providing medical care through our centers. Therefore, the projected cost that is included in our total revenue requirement is largely based on budgeting. For traditional carriers, projected claims trends are developed to project expected costs. However, given KFHP's cost structure, KFHP's projected claims trends fall out of the development of projected budgeted costs. For 2014 to 2016, our projected total internal annualized medical expense trend for Small Group is 3.5% and is shown in Exhibit 6 of our filing.

Alternative AV Calculations

The AV calculator does not have an option for outpatient facility copay. To calculate the impact on the actuarial value of the plan for this benefit we used the alternate method described in 156.135 (b)(2). KFHP requested from a major actuarial consulting firm the national average allowed amount for outpatient facility costs in 2014. We have updated the national average allowed amount for the 2016 rate filing. To determine AVs for plans outpatient facility copays, we propose an OP Copay Converter to be used with the AV calculator. To create this converter, we compared the copay amount to the estimated average national OP facility allowed amount to calculate the implied coinsurance % for OP procedures. This coinsurance should only be applied to the OP facility cost and not the OP professional cost, which should be covered at 100%.

Plan designs have been changed to waive primary office visit copays for children younger than five. As the AV calculator does not have an adjustment to account for this benefit, we lowered the copay amount 16% by multiplying the actual copay by a factor of 0.84. For example, a \$20 primary office visit copay is entered as \$16.80. The 16% adjustment is based on KFHP data (as a proxy for standard population). Primary care utilization was divided between children under five and all other members. The data showed 16% of primary care visits were attributed to children under five. I certify the calculation to be actuarially sound.

AV Pricing Values

The rates for specific plans are calculated by multiplying plan factors times the index rate. The plan factors use industry standard data in a model from a national actuarial consulting firm, calibrated to KFHP experience to calculate the impact of the various cost share and plan elements for EHBs, including utilization copayment effect.

The reference plan used as the basis for the AV pricing values is a \$0 cost share plan valued using the same industry standard factors described above.

Exhibit 9 indicates the portion of the AV Pricing Value that is attributable to each of the allowable modifiers to the Index Rate. The plan factor shown in Exhibit 9 reflects both member cost shares and the resulting dampening of expected utilization due to those cost shares.

Network Adjustment

KFHP provides services to its members in its Signature network in its medical offices and externally with contracted providers. KFHP offers an expanded network of contracted non-KFHP physicians in its Select network. Rates for products with the Select network are adjusted by a factor of 1.05 for HMO to reflect the additional cost. This adjustment is consistent with the factor already filed in prior filings. For the POS plans, the factor is 1.04, reflecting steerage of 80% for Tier 1.

Age Factors

The age factor table used to develop age specific rates is the standard table provided by DISB.

Exhibit 12 shows the development of the age calibration factor. The development starts with the average age in the projection period from Exhibit 5. That age is rounded to the nearest age and the age factor is pulled from the DISB age curve. As described in the Actuarial Memorandum instructions, the ratio of the age factor for the nearest rounded age to the age factor for the average age in the projection period is the age calibration factor used in the rate development.

Non-EHB

An adjustment has been made to the base period allowed amount to remove the Non-EHB benefits from the Index Rate. This multiplier was calculated by summing the allowed amount for Non-EHB benefits in the base period and adding the adult preventive dental capitation and then dividing by total allowed.

Additional URRT Items

Membership Projections:

The total membership projection included across new plans in Section II of Worksheet 2 is consistent with KFHP's business plan. Detailed assumptions are presented and documented in Exhibit 7.1-7.3.

An assumption is made in Worksheet 2 as to the distribution of members by product based on KFHP's expected distribution of membership by metal level.

Terminated Plans:

The following non-grandfathered plans are included in the "Terminate Plans" column in Worksheet 2 of the URRT.

```
DC Added Choice POS Plan 1 ($5/$10)
DC Added Choice POS Plan 2 ($15/$25)
DC DHMO Plan 1 ($10/$20/$250 Ded - 90%)
DC DHMO Plan 2 ($15/$25/$500 Ded - 90%)
DC DHMO Plan 3 ($25/$35/$2,000 Ded - 80%)
DC DHMO Plan 4 ($25/$35/$1000 Ded - 80%)
DC Flex Choice Plan 1 (100/90/70 - $10-$20 OV)
DC Flex Choice Plan 2 (100/80/60 - $15-$25 OV)
DC Flex Choice Plan 3 (100/70/50 - $25-$35 OV)
DC Flex Choice Plan 4 (100/80/60 - $10-$25 OV)
DC Flex Choice Plan 4 (100/80/60 - $10-$25 OV)
DC HDHP Plan 1 ($1,250 Ded - 80%)
DC HDHP Plan 2 ($1,750 Ded - 70%)
```

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DC HDHP Plan 3 ($2,250 Ded – 70%)
DC HDHP Plan 4 ($1,250 Ded - 100%)
DC HDHP Plan 5 ($2,250 Ded - 100%)
DC HDHP Plan 8 ($2,800 Ded - 100%)
DC HMO Plan 1 ($5/$10/$0 IP/$0 Rx Ded)
DC HMO Plan 2 ($10/$20/$0 IP/$0 Rx Ded)
DC HMO Plan 3 ($15/$25/$0 IP/$0 Rx Ded)
DC HMO Plan 4 ($15/$30/$500 IP/$0 Rx Ded)
DC HMO Plan 5 ($20/$30/$250 IP/$0 Rx Ded)
DC HMO Plan 6 ($20/$40/20% IP/$0 Rx Ded)
DC HMO Plan 7 ($10/$10/$250 IP/$0 Rx Ded)
```

Warning Alert:

There are no warning alerts in Wk2 of the URRT

DC HMO Plan 8 (\$20/\$20/\$500 IP/\$0 Rx Ded)

Summary Rate Calculation

Exhibit 1 shows the development of the Market Adjusted Index Rate from the base period Medical Cost Data. The Plan Adjusted Index Rates are calculated using the Market Adjusted Index Rate and the allowable plan adjustment factors in Exhibit 9. The final 2016 Consumer Adjusted Premium Rates are developed by applying the age slope and age calibration to the Plan Adjusted Index Rates to generate age specific rates.

Exhibit Table of Contents:

The following exhibits are included in this filing:

- Exhibit 1 Market Adjusted Index Rate Calculation
- Exhibit 2 Allowed Claims Development
- Exhibit 3 –Non-EHB Adjustments
- Exhibit 4 Utilization Copayment Effect Adjustments
- Exhibit 5 Demographic Adjustment
- Exhibit 6 Trend Factor
- Exhibits 7.1 Risk Adjustment and Morbidity Development Combined Small and Individual
- Exhibits 7.2 Risk Adjustment and Morbidity Development Individual Line of Business
- Exhibits 7.3 Risk Adjustment and Morbidity Development Small Group Line of Business
- Exhibit 8 Administrative Expense
- Exhibit 9 Plan Adjusted Index Rates Development
- Exhibit 10 AV Calculator Values
- Exhibit 11 Quarterly Rate Factors
- Exhibit 12 Age Calibration
- Exhibit 13 Age Factors
- Exhibit 14 Pediatric Dental Adjustment Factor
- Appendix I-A 1st Quarter 2016 Signature Network Rate Sheet
- Appendix I-B 1st Quarter 2016 Select Network Rate Sheet
- Appendix II-A 2nd Quarter 2016 Signature Network Rate Sheet
- Appendix II-B 2nd Quarter 2016 Select Network Rate Sheet
- Appendix III-A 3rd Quarter 2016 Signature Network Rate Sheet
- Appendix III-B 3rd Quarter 2016 Select Network Rate Sheet
- Appendix IV-A 4th Quarter 2016 Signature Network Rate Sheet
- Appendix IV-B 4th Quarter 2016 Select Network Rate Sheet

Certification

This filing is in conformity with all applicable Actuarial Standards of Practice, including ASOP No. 8. To the best of my knowledge, the rating methodologies of Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. and the development of the Index Rate comply with the applicable District and Federal Statutes and Regulations (45 CFR 156.80(d)(1). The percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV were calculated in accordance with actuarial standards of practice. The index rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates. The rating methodologies produce premiums that are reasonable in relation to benefits being provided and the populations being covered and are based on sound and commonly accepted actuarial principles and are neither excessive nor deficient.

John Xu, FSA, MAAA Actuarial Manager

Kaiser Foundation Health Plan, Inc.

5/1/2015

Index Rate Development Summary Index Rate Calculation Exhibit 1

			<u>Source</u>
(1)	Base Period Allowed	\$321.92	Exhibit 2
(2)	Non-EHB Claims Adjustment	0.983	Exhibit 3
(3)	Experience Period Index Rate	\$316.58	(1) * (2)
(4)	Product/Network Adjustment	1.000	
(5)	Adjusted Base Period Allowed	\$316.58	(1) * (2)
(6)	Base Period Utilization Adjustment	1.096	Exhibit 4
(7)	Projection Period Utilization Adjustment	0.906	
(8)	Demographic Adjustment	0.997	Exhibit 5
(9)	Product/Network Moribidty Adjustment	1.000	
(10)	Additional EHB (including Ped Dental)	1.007	Exhibit 14
(10)	Annualized Trend	3.5%	Exhibit 6
(11)	Months of Trend	24	
(12)	Trend Factor	1.071	{1 + (10)} ^{ (11) / 12}
(14)	Change in Morbidity	0.992	Exhibit 7
(15)	Contract Limit of 3 Children Factor	1.005	
(16)	Combined Projection Period Index Rate Prior to Separate Modifiers	336.41	(5) * (6) * (7) * (8) * (9) * (10) * (12) * (13) * (14) * (15)
(17)	Risk Adjustment	1.001	Exhibit 7
(18)	Exchange fee	1.000	
(19)	Reinsurance Premium	1.0067	
(20)	Market Adjusted Index Rate	\$338.87	(16) * (17) * (18) * (19)

Allowed Claims Development Exhibit 2

Current Pool	Current Plans	Member Months	Total
Individual	All	20,558	\$320.97
Small Group	All	34,232	\$322.49
Grand Total		54,790	\$321.92

Non-EHB Adjustments Exhibit 3

Current Pool	Current Plans	Member Months	Non-EHB PMPM
Individual	All	20,558	\$5.34
Small Group	All	34,232	\$5.34
Grand Total		54,790	\$5.34

Multplier to Remove Non-EHB [1 - (Non-EHB PMPM / Allowed PMPM)]	0.9834

Utilization Copayment Effect Adjustment Exhibit 4

Current Pool	Current Plan	Member Months	Allowed Amount	Copay Impact
Individual	All	20,558	\$320.97	0.900
Small Group	All	34,232	\$322.49	0.920
Grand Total		54,790	\$321.92	0.913

Adjustment Factor is the Inverse of the Total 1.096

Demographic Adjustment Exhibit 5

		Member Months	Average Age Factor ¹	Weighed Average Age ²
Experience Period	Individual	20558	1.0559	42.1
	Small Group	34232	0.9953	40.5
	Combined	54790	1.0180	41.1
Projection Period	Individual	31598	1.0559	42.1
	Small Group	68016	0.9953	40.5
	Combined	99614	1.0145	41.0
Demographic Factor 0.9965				

Average age factor based on CMS Age curve

Weighted Average Age = Interpolation on age curve of average age factor

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Exhibit 6 Trend Calculation

		2014 to 2016 Annualized
Category	Weight	Trend
Inpatient Hospital	20.6%	3.5%
Outpatient Hospital	16.1%	5.5%
Professional	46.2%	2.0%
Other	2.4%	3.5%
Prescription Drug	14.5%	6.0%
Capitation	0.3%	0.0%
Composite	100.0%	3.5%

Risk Adjustment and Morbidity Development Exhibit 7.1

Development of Risk Adjustment Factor Applied to Index Rate

	<u>Small</u>	<u>Individual</u>	<u>1 otai</u>
Average Members	5,668	2,633	8,301
Adjustment for change in risk in Kaiser membership	100.0%	97.5%	99.21%
Adjustment for risk adjustment recoveries	100.0%	97.0%	

Risk Adjustment and Morbidity Development Exhibit 7.2

Current Risk Profile of Non-Grandfathered Kaiser members relative to current market

	CY 2013 Member Months	<u>Morbidity</u>
(1) Non-Grandfathered Guaranteed Issue	12	1.401
(2) Non-Grandfathered Medically Underwritten and ACA plans	20,530	1.050
(3) Dues Subsidy	16	1.274
(4) Total	20,558	1.050

Impact of projected membership to Kaiser risk profile in 2016 relative to current market

	Member Months	<u>Morbidity</u>
(5) Current Members [from (4) above]	20,558	1.050
(6) Gender to Unisex Selection Adjustment	20,530	1.000
(7) Total Mobidity Change	20,558	1.050
(8) New Entrants previoulsy uninsured	5,520	0.950
(9) Transfers from other carriers or other KP Segments	5,520	1.000
(10) Subtotal	31,598	1.024

Impact to Current Market from all new entrants in 2016

	Member Months	Risk Relativity
(11) Current Market	360,000	1.000
(12) Uninsured New Entrants	70,554	0.950
(13) Transfers from Group	70,554	1.000
(14) 2015 Market	501,108	0.993
(15) Kaiser risk relativity to 2016 market [$(10)/(14)$]		1.031
(16) Pent Up Demand Factor for New Entrants		1.000
(17) Adjustment for change in risk in Kaiser membership [(10) / (4)]		97.5% 97.0%
(18) Adjustment for risk adjustment recoveries [1/(15)]	mama] / (10) mama]]	100.0%
(19) Adjustment for Pent Up Demand [{ (8) mems * (16) + (5) mems + (9) n	mems / (10) mems }]	
(20) Risk Adjustment fee 1.75/12/ Average Baf / Plan Index Rate		1.0006
(21) Adjustment for net risk adjustment [(18) * (20)]		97.0%

Risk Adjustment Factor Exhibit 7.3

Current Risk Profile of Non-Grandfathered Kaiser members relative to current market

	CY 2013 Member Months	<u>Morbidity</u>
(1) Non-Grandfathered ¹	34,212	1.050
Impact of projected membership to Kaiser	risk profile in 2015 relative to curi	ent market
	Members Months	<u>Morbidity</u>
(2) Current Members [from (4) above]	34,212	1.050
(3) New to Kaiser	3,048	1.000
(4) Subtotal	37,260	1.046
	Member Months	
(5) 2015 Market	568,490	1.000
(6) Kaiser risk relativity to 2015 market [(4) / (5)]	1.046
Development of Risk Adjustment Factor Ap	oplied to Index Rate	
(7) Adjustment for change in risk in Kaiser member	ership [(4) / (1)]	99.6%
(8) Adjustment for risk adjustment recoveries [1 /	(6)]	95.6%
(9) Total Adjustment [(7) * (8)]		95.2%

¹ Current Kaiser portfolio is expected to be 1.05 to market.

Administrative Expense Factor - Small Group Exhibit 8

Retention Category	Percent of Retention
Claims Processing	1.72%
Customer Service	0.95%
Taxes	2.88%
Capital Contribution	1.50%
Member Communication Materials	0.54%
Open Enrollment	0.84%
Utilization Review	2.31%
Care Management	0.46%
Ad Hoc Reports	0.00%
Other - Community Service	1.13%
Corporate and Other Overhead	4.43%
Commissions	5.75%
Total	22.51%

Plan Adjusted Index Rates Exhibit 9

			Allowable Plan Modifiers								
Plans	Metallic Level	Name	Plan Design	Network Factor	Utilization Copay Effect	Non-EHB	Admin	Index Rate			
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	0.951	1.000	0.9225	1.0169	1.2905	430.58			
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	0.895	1.000	0.9433	1.0169	1.2905	414.70			
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	0.901	1.000	0.8913	1.0169	1.2905	394.41			
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	0.862	1.000	0.9264	1.0169	1.2905	392.18			
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	0.810	1.000	0.9043	1.0169	1.2905	359.67			
6	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental	0.800	1.000	0.8993	1.0169	1.2905	353.08			
7	Gold	KP DC Gold 1500/10/HSA/Dental/Ped Dental	0.774	1.000	0.8869	1.0169	1.2905	336.99			
8	Silver	KP DC Silver 1250/35/Dental/Ped Dental	0.735	1.000	0.9022	1.0169	1.2905	325.79			
9	Silver	KP DC Silver 2000/35/Dental/Ped Dental	0.699	1.000	0.8917	1.0169	1.2905	306.25			
10	Silver	KP DC Silver 1500/30/HSA/Dental/Ped Dental	0.710	1.000	0.8784	1.0169	1.2905	306.15			
11	Silver	KP DC Silver 2500/30/10%/HSA/Dental/Ped Dental	0.675	1.000	0.8577	1.0169	1.2905	284.41			
12	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	0.604	1.000	0.8525	1.0169	1.2905	252.72			
13	Bronze	KP DC Bronze 6000/30/10%/HSA/Dental/Ped Dental	0.592	1.000	0.8029	1.0169	1.2905	233.33			
14	Bronze	KP DC Bronze 5000/20%/HSA/Dental/Ped Dental	0.588	1.000	0.8234	1.0169	1.2905	237.59			
15	Bronze	KP DC Bronze 5000/20/HSA/Dental/Ped Dental	0.586	1.000	0.8234	1.0169	1.2905	236.91			
16	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	0.690	1.000	0.8428	1.0169	1.2905	285.39			
17	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	0.794	1.000	0.8857	1.0169	1.2905	345.21			
18	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	0.927	1.000	0.9162	1.0169	1.2905	417.09			
19	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	0.951	1.050	0.9225	1.0169	1.2905	452.10			
20	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	0.895	1.050	0.9433	1.0169	1.2905	435.43			
21	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	0.901	1.050	0.8913	1.0169	1.2905	414.13			
22	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	0.862	1.050	0.9264	1.0169	1.2905	411.79			
23	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	0.810	1.050	0.9043	1.0169	1.2905	377.66			
24	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel	0.800	1.050	0.8993	1.0169	1.2905	370.73			

AV Calculator Values Exhibit 10

Plans	Metallic Level	Name	AV Value
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	0.920
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	0.888
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	0.819
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	0.817
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	0.796
6	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental	0.816
7	Gold	KP DC Gold 1500/10/HSA/Dental/Ped Dental	0.784
8	Silver	KP DC Silver 1250/35/Dental/Ped Dental	0.714
9	Silver	KP DC Silver 2000/35/Dental/Ped Dental	0.703
10	Silver	KP DC Silver 1500/30/HSA/Dental/Ped Dental	0.716
11	Silver	KP DC Silver 2500/30/10%/HSA/Dental/Ped Dental	0.687
12	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	0.620
13	Bronze	KP DC Bronze 6000/30/10%/HSA/Dental/Ped Dental	0.609
14	Bronze	KP DC Bronze 5000/20%/HSA/Dental/Ped Dental	0.619
15	Bronze	KP DC Bronze 5000/20/HSA/Dental/Ped Dental	0.617
16	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	0.620
17	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	0.703
18	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	0.796
19	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	0.920
20	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	0.888
21	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	0.819
22	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	0.817
23	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	0.796
24	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel	0.816

Quarterly Rate Factors Exhibit 11

Plans	Metallic Level	Name	2Q 2016	3 Q 2016	4 Q 2016
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	1.009	1.017	1.026
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	1.009	1.017	1.026
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	1.009	1.017	1.026
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	1.009	1.017	1.026
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	1.009	1.017	1.026
6	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental	1.009	1.017	1.026
7	Gold	KP DC Gold 1500/10/HSA/Dental/Ped Dental	1.009	1.017	1.026
8	Silver	KP DC Silver 1250/35/Dental/Ped Dental	1.009	1.017	1.026
9	Silver	KP DC Silver 2000/35/Dental/Ped Dental	1.009	1.017	1.026
10	Silver	KP DC Silver 1500/30/HSA/Dental/Ped Dental	1.009	1.017	1.026
11	Silver	KP DC Silver 2500/30/10%/HSA/Dental/Ped Dental	1.009	1.017	1.026
12	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	1.009	1.017	1.026
13	Bronze	KP DC Bronze 6000/30/10%/HSA/Dental/Ped Dental	1.009	1.017	1.026
14	Bronze	KP DC Bronze 5000/20%/HSA/Dental/Ped Dental	1.009	1.017	1.026
15	Bronze	KP DC Bronze 5000/20/HSA/Dental/Ped Dental	1.009	1.017	1.026
16	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	1.009	1.017	1.026
17	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	1.009	1.017	1.026
18	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	1.009	1.017	1.026
19	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
20	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
21	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
22	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
23	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	1.009	1.017	1.026
24	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel	1.009	1.017	1.026

Age Calibration Factor Exhibit 12

	Weighted Averge Age	Age Factor
Average Age in the Projection Period	41.0	1.015
Nearest Rounded Age	41.0	1.013
Calibration Factor		0.999

Age Factors Exhibit 13

Age	Age Slope	Age Factor Indexed to Age 21
20	0.654	0.90
21	0.727	1.00
22	0.727	1.00
23	0.727	1.00
24	0.727	1.00
25	0.727	1.00
26	0.727	1.00
27	0.727	1.00
28	0.744	1.02
29	0.76	1.05
30	0.779	1.07
31	0.799	1.10
32	0.817	1.12
33	0.836	1.15
34	0.856	1.18
35	0.876	1.20
36	0.896	1.23
37	0.916	1.26
38	0.927	1.28
39	0.938	1.29
40	0.975	1.34
41	1.013	1.39
42	1.053	1.45
43	1.094	1.50
44	1.137	1.56
45	1.181	1.62
46	1.227	1.69
47	1.275	1.75
48	1.325	1.82
49	1.377	1.89
50	1.431	1.97
51	1.487	2.05
52	1.545	2.13
53	1.605	2.21
54	1.668	2.29
55	1.733	2.38
56	1.801	2.48
57	1.871	2.57
58	1.944	2.67
59	2.02	2.78
60	2.099	2.89
61	2.181	3.00
62	2.181	3.00
63	2.181	3.00
64+	2.181	3.00

Pediatric Dental Factor Development Exhibit 14

Current Pool	Current Plan	Member Months	Ped Dental Factor
Individual	All	20,558	1.002
Small Group	All	34,232	1.009
Grand Total		54,790	1.007

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective January 1, 2016 District of Columbia Small Group Exchange Appendix 1-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age		tal KP DC Platinum 500/20/Dental/Ped Dental	KP DC Gold 0/20/Dental Ped Dental	CP DC Gold 500/20/Dental/Ped De	nt KP DC Gold 1000/30/Dental/Ped Den	tal KP DC Gold 1350/0%/HSA/Dental Ped Dental			KP DC Silver 2000/35/Dental/Ped D			KP DC Bronze 4500/50/Dental/Ped Dental	KP DC Brouze 6600/30/10%/HSA/Dental/Ped Dental	KP DC Bronze 5000/20%/ISA/Dental/Ped Dent		DC Brooze 4500/50/POS/Dontal/Ped De		KP DC Gold 1000/30/POS/Dental/Ped Dental
20 and Under	\$277.57	\$267.33	\$254.26	\$252.82	\$231.86	\$227.61	\$217.24	\$210.02	\$197.43	\$197.36	\$183.34	\$162.91	\$150.42	\$153.16	\$152.72	\$183.97	\$222.54	\$268.88
21	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
22	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
23	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
24	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
25	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
26	\$308.55 \$308.55	\$297.17 \$297.17	\$282.64 \$282.64	\$281.04 \$281.04	\$257.74 \$257.74	\$253.01 \$253.01	\$241.49 \$241.49	\$233.46 \$233.46	\$219.46 \$219.46	\$219.39 \$219.39	\$203.81 \$203.81	\$181.10 \$181.10	\$167.21 \$167.21	\$170.26 \$170.26	\$169.77 \$169.77	\$204.51 \$204.51	\$247.38 \$247.38	\$298.89 \$298.89
27	\$308.55	\$304.12	\$282.04 \$289.25	\$281.04 \$287.61	\$257.74	\$253.01 \$258.93	\$241.49 \$247.14	\$233.46 \$238.92	\$219.46 \$224.59	\$219.39 \$224.52	\$203.81 \$208.57	\$181.10	\$167.21 \$171.12	\$170.26	\$173.74	\$204.51 \$209.29	\$247.38 \$253.16	\$298.89 \$305.88
28	\$313.77	\$310.66	\$289.25 \$795.47	\$287.01	\$263.77	\$258.93 \$264.50	\$247.14 \$252.45	\$238.92	\$224.59 \$229.42	\$224.52 \$229.35	\$208.57 \$213.06	\$183.33 \$189.32	\$171.12 \$174.80	\$174.24	\$173.74 \$177.48	\$209.29	\$253.16 \$258.61	\$305.88 \$312.46
29	\$330.62	\$318.43	\$293.47 \$302.85	\$301.14	\$276.18	\$271.11	\$252.45 \$258.76	\$250.16	\$235.16	\$235.08	\$218.38	\$194.05	\$179.17	\$182.43	\$181.92	\$219.14	\$265.07	\$312.40 \$320.27
30	\$330.02	\$318.43 \$326.60	\$310.63	\$301.14	\$270.18	\$271.11	\$258.76 \$265.40	\$250.16	\$233.10 \$241.20	\$235.08 \$241.11	\$218.38	\$194.05	\$179.17 \$183.77	\$182.43 \$187.12	\$181.92 \$186.59	\$219.14 \$224.76	\$265.07 \$271.88	\$320.27 \$328.49
31	\$346.75	\$333.96	\$317.63	\$315.83	\$289.65	\$284.34	\$203.40 \$271.38	\$262.37	\$241.20	\$246.55	\$229.04	\$203.52	\$183.77	\$191.33	\$190.39	\$229.83	\$278.00	\$328.49 \$335.89
32	\$354.81	\$333.90 \$341.73	\$317.03 \$325.01	\$323.18	\$296.39	\$290.95	\$271.38 \$277.70	\$268.47	\$252.37	\$252.28	\$234.36	\$203.32 \$208.25	\$197.71	\$191.33	\$190.79	\$235.17	\$284.47	\$343.70
34	\$363.30	\$349.90	\$332.79	\$330.91	\$303.48	\$297.91	\$284.34	\$274.89	\$258.40	\$258.32	\$239.97	\$213.23	\$196.88	\$200.47	\$199.00	\$240.80	\$291.27	\$351.92
35	\$371.79	\$358.08	\$340.56	\$338.64	\$310.57	\$304.87	\$290.98	\$281.31	\$264.44	\$264.35	\$245.58	\$218.21	\$201.48	\$205.47	\$204.57	\$246.42	\$298.08	\$360.15
36	\$380.28	\$366.25	\$348.34	\$346.37	\$317.66	\$311.83	\$297.63	\$287.74	\$270.48	\$270.39	\$251.18	\$223.20	\$206.07	\$209.83	\$209.24	\$252.05	\$304.88	\$368.37
37	\$388.77	\$374.43	\$356.12	\$354.10	\$324.75	\$318.79	\$304.27	\$294.16	\$276.52	\$276.42	\$256.79	\$228.18	\$210.67	\$214.52	\$213.91	\$257.68	\$311.69	\$376.59
38	\$393.43	\$378.92	\$360.39	\$358.35	\$328.65	\$322.62	\$307.92	\$797.69	\$279.84	\$279.74	\$259.87	\$230.92	\$213.20	\$217.09	\$216.48	\$260.77	\$315.43	\$381.11
30	\$398.10	\$383.42	\$364.67	\$362.61	\$332.55	\$326.45	\$311.58	\$301.22	\$283.16	\$283.06	\$262.96	\$233.66	\$215.73	\$219.67	\$219.05	\$263.87	\$319.17	\$385.64
40	\$413.81	\$398.54	\$379.05	\$376.91	\$345.67	\$339.33	\$323.87	\$313.10	\$294.33	\$294.23	\$273.33	\$242.88	\$224.24	\$228.33	\$227.69	\$274.27	\$331.76	\$400.85
41	\$429.93	\$414.08	\$393.83	\$391.60	\$359.14	\$352.55	\$336.49	\$325.31	\$305.80	\$305.69	\$283.98	\$252.34	\$232.98	\$237.23	\$236.56	\$284.96	\$344.69	\$416.47
42	\$446.91	\$430.43	\$409.38	\$407.06	\$373.32	\$366.47	\$349.78	\$338.15	\$317.87	\$317.76	\$295.20	\$262.31	\$242.18	\$246.60	\$245.90	\$296.22	\$358.30	\$432.91
43	\$464.31	\$447.19	\$425.32	\$422.91	\$387.85	\$380.74	\$363.40	\$351.32	\$330.25	\$330.14	\$306.69	\$272.52	\$251.61	\$256.20	\$255.48	\$307.75	\$372.26	\$449.77
44	\$482.56	\$464.76	\$442.03	\$439.54	\$403.10	\$395.71	\$377.68	\$365.13	\$343.23	\$343.11	\$318.74	\$283.23	\$261.50	\$266.27	\$265.52	\$319.85	\$386.89	\$467.45
45	\$501.24	\$482.75	\$459.14	\$456.54	\$418.70	\$411.02	\$392.29	\$379.26	\$356.51	\$356.39	\$331.08	\$294.19	\$271.62	\$276.58	\$275.79	\$332.22	\$401.86	\$485.54
46	\$520.76	\$501.55	\$477.02	\$474.33	\$435.01	\$427.03	\$407.57	\$394.03	\$370.40	\$370.27	\$343.98	\$305.65	\$282.20	\$287.35	\$286.53	\$345.16	\$417.51	\$504.45
47	\$541.13	\$521.17	\$495.68	\$492.88	\$452.02	\$443.73	\$423.52	\$409.44	\$384.89	\$384.76	\$357.43	\$317.61	\$293.24	\$298.59	\$297.74	\$358.67	\$433.84	\$524.18
48	\$562.35	\$541.61	\$515.12	\$512.21	\$469.75	\$461.13	\$440.13	\$425.50	\$399.98	\$399.85	\$371.45	\$330.06	\$304.74	\$310.30	\$309.42	\$372.73	\$450.86	\$544.74
49	\$584.42	\$562.87	\$535.34	\$532.31	\$488.19	\$479.23	\$457.40	\$442.20	\$415.68	\$415.54	\$386.03	\$343.01	\$316.70	\$322.48	\$321.56	\$387.36	\$468.55	\$566.12
50	\$607.34	\$584.94	\$556.33	\$553.19	\$507.33	\$498.02	\$475.34	\$459.54	\$431.98	\$431.83	\$401.16	\$356.47	\$329.12	\$335.12	\$334.17	\$402.55	\$486.93	\$588.32
51	\$631.11	\$607.83	\$578.10	\$574.84	\$527.18	\$517.51	\$493.94	\$477.53	\$448.89	\$448.73	\$416.86	\$370.42	\$342.00	\$348.24	\$347.25	\$418.30	\$505.98	\$611.34
52	\$655.72	\$631.54	\$600.65	\$597.26	\$547.75	\$537.70	\$513.20	\$496.15	\$466.40	\$466.24	\$433.12	\$384.86	\$355.34	\$361.82	\$360.79	\$434.62	\$525.72	\$635.19
53	\$681.19	\$656.07	\$623.98	\$620.45	\$569.02	\$558.58	\$533.13	\$515.42	\$484.51	\$484.34	\$449.94	\$399.81	\$369.14	\$375.87	\$374.81	\$451.50	\$546.13	\$659.86
54	\$707.93	\$681.82	\$648.47	\$644.81	\$591.35	\$580.51	\$554.06	\$535.65	\$503.53	\$503.35	\$467.60	\$415.50	\$383.63	\$390.63	\$389.52	\$469.22	\$567.57	\$685.76
55	\$735.51	\$708.39	\$673.74	\$669.93	\$614.40	\$603.13	\$575.65	\$556.52	\$523.15	\$522.97	\$485.83	\$431.70	\$398.58	\$405.85	\$404.70	\$487.50	\$589.69	\$712.48
56	\$764.37	\$736.18	\$700.18	\$696.22	\$638.51	\$626.79	\$598.24	\$578.36	\$543.67	\$543.49	\$504.89	\$448.63	\$414.22	\$421.77	\$420.58	\$506.63	\$612.83	\$740.44
57	\$794.08	\$764.80	\$727.39	\$723.28	\$663.32	\$651.16	\$621.49	\$600.84	\$564.81	\$564.61	\$524.51	\$466.07	\$430.32	\$438.17	\$436.92	\$526.32	\$636.65	\$769.22
58	\$825.07	\$794.64	\$755.77	\$751.50	\$689.20	\$676.56	\$645.74	\$624.28	\$586.84	\$586.64	\$544.98	\$484.26	\$447.11	\$455.26	\$453.97	\$546.86	\$661.49	\$799.23
59	\$857.32	\$825.70	\$785.32	\$780.88	\$716.15	\$703.01	\$670.99	\$648.69	\$609.79	\$609.58	\$566.28	\$503.19	\$464.59	\$473.06	\$471.72	\$568.24	\$687.35	\$830.47
60	\$890.85	\$858.00	\$816.03	\$811.42	\$744.16	\$730.51	\$697.23	\$674.06	\$633.63	\$633.42	\$588.43	\$522.87	\$482.76	\$491.56	\$490.17	\$590.46	\$714.23	\$862.95
61	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66
62	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66
63	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66
64+	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66

Rates effective January 1, 2016 District of Columbia Small Group Exchange Appendix I-B

19 20 22 23 21 24 Gold Platinum Gold Gold Gold Platinum Age KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel KP DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$291.45 \$280.70 \$266.97 \$265.46 \$243.46 \$238.99 \$295.09 \$323.98 \$312.03 \$296.77 \$270.63 \$265.67 21 22 \$323.98 \$312.03 \$296.77 \$295.09 \$270.63 \$265.67 23 \$323.98 \$312.03 \$296,77 \$295.09 \$270.63 \$265.67 \$323.98 \$270.63 24 \$312.03 \$296.77 \$295.09 \$265.67 25 \$323.98 \$312.03 \$296.77 \$295.09 \$270.63 \$265.67 26 \$323.98 \$312.03 \$296,77 \$295.09 \$270.63 \$265.67 27 \$323.98 \$312.03 \$296.77 \$295.09 \$270.63 \$265.67 \$301.99 28 \$331.55 \$319.33 \$303.71 \$276.96 \$271.88 \$338.68 \$326.19 \$310.24 \$308.49 \$282.91 \$277.72 29 \$347.15 \$334.35 \$318.00 \$316.20 \$289.99 \$284.67 30 \$342.93 \$326.16 \$324.32 \$297.43 31 \$356.06 \$291.98 \$364.09 \$350.66 \$333.51 \$331.62 \$304.13 \$298.55 32 33 \$372.55 \$358.81 \$341.26 \$339.33 \$311.21 \$305.50 34 \$381.47 \$367.40 \$349.43 \$347.45 \$318.65 \$312.81 \$390.38 \$375.98 \$357.59 \$355.57 \$326.10 35 \$320.11 36 \$399.29 \$384.57 \$365.76 \$363.69 \$333.54 \$327.42 37 \$408.20 \$393.15 \$373.92 \$371.81 \$340.99 \$334.73 38 \$413.11 \$397.87 \$378.41 \$376.27 \$345.08 \$338.75 39 \$418.01 \$402.59 \$382.90 \$380.74 \$349.18 \$342.77 40 \$434.50 \$418.47 \$398.01 \$395.76 \$362.95 \$356.29 \$451.43 \$434.78 \$413.52 \$411.18 \$377.09 41 \$370.18 42 \$469.26 \$451.95 \$429.85 \$427.42 \$391.98 \$384.79 \$487.53 \$446.58 \$407.25 43 \$469.55 \$444.06 \$399.78 44 \$506.69 \$488.00 \$464.14 \$461.51 \$423.25 \$415.49 \$482.10 \$479.37 \$439.63 45 \$526.30 \$506.89 \$431.57 \$526.63 \$500.87 \$498.04 \$456.76 46 \$546.80 \$448.38 \$568.19 \$547.23 \$520.47 \$517.53 \$474.63 \$465.92 47 \$590.47 \$568.69 \$540.88 \$537.82 \$493.24 48 \$484.19 \$562.11 \$558.93 \$512.60 \$503.19 49 \$613.64 \$591.01 50 \$637.71 \$614.19 \$584.15 \$580.85 \$532.70 \$522.93 51 \$662.66 \$638.22 \$607.01 \$603.58 \$553.54 \$543.39 52 \$688.51 \$663.12 \$630.69 \$627.12 \$575.13 \$564.58 53 \$715.25 \$688.87 \$655.18 \$651.47 \$597.47 \$586.51 54 \$743.32 \$715.91 \$680.90 \$677.05 \$620.92 \$609.53 55 \$772.29 \$743.81 \$707.43 \$703.43 \$645.12 \$633.28 56 \$802.59 \$772.99 \$735.19 \$731.03 \$670.43 \$658.13 57 \$833.79 \$803.04 \$763.76 \$759.44 \$696.49 \$683.71 \$793.56 \$789.08 \$723.66 58 \$866.32 \$834.37 \$710.39 59 \$900.19 \$866.99 \$824.59 \$819.92 \$751.96 \$738.16 60 \$935.39 \$900.90 \$856.83 \$851.99 \$781.36 \$767.03 \$971.94 \$936.09 \$890.31 \$885.27 \$811.89 \$797.00 61 \$885.27 62 \$971.94 \$936.09 \$890.31 \$811.89 \$797.00 \$885.27 63 \$971.94 \$936.09 \$890.31 \$811.89 \$797.00 \$971.94 \$890.31 \$885.27 \$811.89 64+ \$936.09 \$797.00

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective April 1, 2016 District of Columbia Small Group Exchange Appendix II-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	P DC Platinum 0/20/Dental/Ped Den P	P DC Platinum 500/20/Dental Ped Den	KP DC Gold @2@Dental/Ped Dental	DC Gold 500/20/Dental/Ped D	P DC Gold 1000/30/Dental/Ped D	en P DC Gold 1350/0%/HSA/Dental/Per	d Den KP DC Gold 1500/10/HSA/Dental/Ped Dental	P DC Silver 1250/35/Dental/Ped De	mP DC Silver 2000/35/Dental/Ped Den	P DC Silver 1500/30/HSA/Dental/Ped Den	KP DC Silver 2500/30/10%/HSA/Dental/Ped Dent	P DC Bronze 4500/50/Dental/Ped De	DC Bronze 6000/30/10%/HSA/Dental/Ped	De P DC Bronze 5000/20%/HSA/Dental/Ped I	es P DC Bronze 5000/20/HSA/Dental/Ped Der	CP DC Bronze 4500/50/POS/Dental/Ped Dent	KP DC Silver 2000/35/POS/Dental/Ped Dental	KP DC Gold 1000/30/POS/Dental/Ped Dental
20 and Under	\$279.95	\$269.63	\$256.44	\$254.99	\$233.85	\$229.57	\$219.11	\$211.82	\$199.13	\$199.06	\$184.91	\$164.31	\$151.71	\$154.48	\$154.03	\$185.55	\$224.45	\$271.19
21	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
22	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
23	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
24	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
25	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
26	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
27	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
28	\$318.48	\$306.73	\$291.73	\$290.08	\$266.04	\$261.15	\$249.26	\$240.97	\$226.52	\$226.45	\$210.36	\$186.92	\$172.59	\$175.74	\$175.23	\$211.09	\$255.33	\$308.51
29	\$325.33	\$313.33	\$298.01	\$296.32	\$271.75	\$266.77	\$254.62	\$246.16	\$231.39	\$231.32	\$214.89	\$190.95	\$176.30	\$179.51	\$179.00	\$215.63	\$260.83	\$315.14
30	\$333.46	\$321.17	\$305.45	\$303.73	\$278.55	\$273.44	\$260.98	\$252.31	\$237.18	\$237.10	\$220.26	\$195.72	\$180.71	\$184.00	\$183.48	\$221.02	\$267.35	\$323.02
31	\$342.02	\$329.41	\$313.30	\$311.52	\$285.70	\$280.46	\$267.68	\$258.79	\$243.27	\$243.18	\$225.91	\$200.74	\$185.35	\$188.73	\$188.19	\$226.69	\$274.22	\$331.31
32	\$349.73	\$336.83	\$320.36	\$318.54	\$292.14	\$286.78	\$273.71	\$264.62	\$248.75	\$248.67	\$231.01	\$205.27	\$189.52	\$192.97	\$192.43	\$231.80	\$280.39	\$338.78
33	\$357.86	\$344.67	\$327.80	\$325.96	\$298.94	\$293.45	\$280.09	\$270.78	\$254.54	\$254.45	\$236.37	\$210.04	\$193.93	\$197.46	\$196.91	\$237.19	\$286.91	\$346.65
34	\$366.42	\$352.91	\$335.65	\$333.75	\$306.09	\$300.47	\$286.78	\$277.25	\$260.62	\$260.54	\$242.03	\$215.06	\$198.57	\$202.19	\$201.62	\$242.87	\$293.77	\$354.94
35	\$374.98	\$361.16	\$343.49	\$341.55	\$313.24	\$307.49	\$293.48	\$283.73	\$266.71	\$266.62	\$247.69	\$220.08	\$203.21	\$206.91	\$206.33	\$248.54	\$300.64	\$363.24
36	\$383.55	\$369.40	\$351.33	\$349.35	\$320.39	\$314.51	\$300.19	\$290.21	\$272.80	\$272.71	\$253.34	\$225.12	\$207.84	\$211.63	\$211.04	\$254.22	\$307.50	\$371.53
37	\$392.11	\$377.65	\$359.18	\$357.14	\$327.54	\$321.53	\$306.88	\$296.69	\$278.90	\$278.79	\$259.00	\$230.14	\$212.48	\$216.36	\$215.75	\$259.89	\$314.37	\$379.82
38	\$396.81	\$382.17	\$363.49	\$361.43	\$331.47	\$325.39	\$310.56	\$300.25	\$282.24	\$282.14	\$262.10	\$232.90	\$215.03	\$218.95	\$218.34	\$263.01	\$318.14	\$384.38
39	\$401.52	\$386.71	\$367.80	\$365.72	\$335.41	\$329.25	\$314.26	\$303.81	\$285.59	\$285.49	\$265.22	\$235.67	\$217.58	\$221.56	\$220.93	\$266.14	\$321.91	\$388.95
40	\$417.36	\$401.96	\$382.31	\$380.15	\$348.64	\$342.24	\$326.65	\$315.79	\$296.86	\$296.76	\$275.68	\$244.97	\$226.17	\$230.29	\$229.65	\$276.63	\$334.61	\$404.29
41	\$433.62	\$417.64	\$397.21	\$394.96	\$362.22	\$355.58	\$339.38	\$328.10	\$308.43	\$308.32	\$286.42	\$254.51	\$234.98	\$239.27	\$238.59	\$287.41	\$347.65	\$420.05
42	\$450.75	\$434.13	\$412.90	\$410.56	\$376.53	\$369.62	\$352.78	\$341.05	\$320.60	\$320.49	\$297.74	\$264.56	\$244.26	\$248.72	\$248.01	\$298.76	\$361.38	\$436.63
43	\$468.30	\$451.03	\$428.97	\$426.54	\$391.18	\$384.01	\$366.52	\$354.34	\$333.09	\$332.98	\$309.32	\$274.86	\$253.77	\$258.40	\$257.67	\$310.39	\$375.46	\$453.63
44	\$486.71	\$468.75	\$445.83	\$443.32	\$406.56	\$399.11	\$380.92	\$368.27	\$346.18	\$346.06	\$321.48	\$285.66	\$263.75	\$268.56	\$267.80	\$322.60	\$390.21	\$471.47
45	\$505.55	\$486.90	\$463.08	\$460.46	\$422.30	\$414.55	\$395.66	\$382.52	\$359.57	\$359.45	\$333.92	\$296.72	\$273.95	\$278.96	\$278.16	\$335.07	\$405.31	\$489.71
46	\$525.23	\$505.86	\$481.12	\$478.40	\$438.75	\$430.70	\$411.07	\$397.41	\$373.58	\$373.45	\$346.93	\$308.28	\$284.62	\$289.82	\$288.99	\$348.12	\$421.10	\$508.78
47	\$545.78	\$525.65	\$499.94	\$497.11	\$455.90	\$447.54	\$427.16	\$412.96	\$388.20	\$388.06	\$360.50	\$320.34	\$295.76	\$301.15	\$300.30	\$361.75	\$437.57	\$528.68
48	\$567.18	\$546.26	\$519.54	\$516.61	\$473.79	\$465.09	\$443.91	\$429.15	\$403.42	\$403.28	\$374.64	\$332.90	\$307.36	\$312.97	\$312.08	\$375.93	\$454.73	\$549.42
49	\$589.44	\$567.70	\$539.94	\$536.88	\$492.38	\$483.35	\$461.33	\$446.00	\$419.25	\$419.11	\$389.35	\$345.96	\$319.42	\$325.25	\$324.32	\$390.69	\$472.57	\$570.98
50	\$612.56	\$589.96	\$561.11	\$557.94	\$511.69	\$502.30	\$479.42	\$463.49	\$435.69	\$435.54	\$404.61	\$359.53	\$331.95	\$338.00	\$337.04	\$406.01	\$491.11	\$593.37
51	\$636.53	\$613.05	\$583.07	\$579.78	\$531.71	\$521.96	\$498.18	\$481.63	\$452.75	\$452.58	\$420.44	\$373.60	\$344.94	\$351.23	\$350.23	\$421.89	\$510.33	\$616.59
52	\$661.35	\$636.96	\$605.81	\$602.39	\$552.46	\$542.32	\$517.61	\$500.41	\$470.41	\$470.24	\$436.84	\$388.17	\$358.39	\$364.93	\$363.89	\$438.35	\$530.24	\$640.65
53	\$687.04	\$661.71	\$629.34	\$625.78	\$573.91	\$563.38	\$537.71	\$519.85	\$488.67	\$488.50	\$453.80	\$403.24	\$372.31	\$379.10	\$378.03	\$455.38	\$550.82	\$665.53
54	\$714.01	\$687.68	\$654.04	\$650.35	\$596.43	\$585.50	\$558.82	\$540.25	\$507.86	\$507.67	\$471.62	\$419.07	\$386.93	\$393.99	\$392.87	\$473.25	\$572.45	\$691.65
55	\$741.83	\$714.47	\$679.53	\$675.68	\$619.68	\$608.31	\$580.59	\$561.30	\$527.64	\$527.46	\$490.00	\$435.41	\$402.00	\$409.34	\$408.18	\$491.69	\$594.76	\$718.60
56	\$770.94	\$742.50	\$706.19	\$702.20	\$643.99	\$632.17	\$603.38	\$583.33	\$548.34	\$548.16	\$509.23	\$452.48	\$417.78	\$425.39	\$424.19	\$510.98	\$618.09	\$746.80
57	\$800.90	\$771.37	\$733.64	\$729.49	\$669.02	\$656.75	\$626.83	\$606.00	\$569.66	\$569.46	\$529.02	\$470.07	\$434.02	\$441.93	\$440.67	\$530.84	\$642.12	\$775.83
58	\$832.16	\$801.47	\$762.26	\$757.96	\$695.12	\$682.37	\$651.29	\$629.64	\$591.88	\$591.68	\$549.66	\$488.42	\$450.95	\$459.17	\$457.87	\$551.56	\$667.17	\$806.10
59	\$864.68	\$832.79	\$792.07	\$787.59	\$722.30	\$709.05	\$676.75	\$654.26	\$615.03	\$614.82	\$571.14	\$507.51	\$468.58	\$477.12	\$475.77	\$573.12	\$693.25	\$837.60
60	\$898.50	\$865.37	\$823.04	\$818.39	\$750.55	\$736.78	\$703.22	\$679.85	\$639.07	\$638.86	\$593.48	\$527.36	\$486.91	\$495.78	\$494.38	\$595.53	\$720.37	\$870.36
61	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36
62	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36
63	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36
64+	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36

Rates effective April 1, 2016 District of Columbia Small Group Exchange Appendix II-B

19 20 22 23 21 24 Gold Gold Gold Gold Platinum Platinum KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel P DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$293.95 \$283.11 \$269.26 \$267.74 \$245.55 \$241.04 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 21 22 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 23 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 \$272.95 24 \$326.76 \$314.71 \$299.32 \$297.62 \$267.95 25 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 26 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 27 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 \$334.40 \$322.07 \$306.32 \$274.22 28 \$304.58 \$279.34 \$341.59 \$328.99 \$312.90 \$285.34 29 \$311.14 \$280.11 \$292.48 30 \$350.13 \$337.22 \$320.73 \$318.92 \$287.12 \$359.12 \$345.88 \$328.96 \$327.11 31 \$299.98 \$294.49 32 \$367.22 \$353.67 \$336.37 \$334.47 \$306.74 \$301.11 33 \$375.75 \$361.89 \$344.19 \$342.24 \$313.88 \$308.12 34 \$384.75 \$370.56 \$352.43 \$350.43 \$321.39 \$315.50 35 \$393.73 \$379.21 \$360.66 \$358.62 \$328.90 \$322.86 36 \$402.72 \$387.87 \$368.90 \$366.81 \$336.41 \$330.23 37 \$411.71 \$396.53 \$377.13 \$375.00 \$343.92 \$337.61 38 \$416.66 \$401.29 \$381.66 \$379.50 \$348.04 \$341.66 39 \$421.60 \$406.05 \$386.19 \$384.01 \$352.18 \$345.71 40 \$438.23 \$422.06 \$401.43 \$399.16 \$366.07 \$359.35 \$455.31 \$438.51 \$417.07 \$373.36 41 \$414.71 \$380.33 42 \$473.29 \$455.83 \$433.54 \$431.09 \$395.35 \$388.10 43 \$491.72 \$473.58 \$450.42 \$447.87 \$410.75 \$403.21 44 \$511.04 \$492.19 \$468.13 \$465.47 \$426.89 \$419.06 \$530.82 \$443.41 45 \$511.24 \$486.24 \$483.49 \$435.28 \$551.50 \$531.15 \$505.17 \$502.32 \$460.68 46 \$452.23 \$573.07 \$551.93 \$524.94 \$521.98 \$478.71 47 \$469.92 \$595.54 \$573.57 \$545.53 \$542.44 \$497.48 \$488.35 48 \$618.91 \$596.09 \$566.94 \$563.73 \$517.00 49 \$507.51 50 \$643.19 \$619.47 \$589.17 \$585.84 \$537.28 \$527.42 51 \$668.35 \$643.70 \$612.22 \$608.76 \$558.29 \$548.06 52 \$694.42 \$668.82 \$636.11 \$632.51 \$580.07 \$569.43 53 \$721.39 \$694.79 \$660.81 \$657.07 \$602.60 \$591.55 54 \$749.70 \$722.06 \$686.75 \$682.87 \$626.25 \$614.77 55 \$778.92 \$750.20 \$713.51 \$709.47 \$650.66 \$638.72 56 \$809.48 \$779.63 \$741.51 \$737.31 \$676.19 \$663.78 57 \$840.95 \$809.94 \$770.32 \$765.96 \$702.47 \$689.58 \$841.54 \$800.38 \$873.76 \$795.86 \$729.88 \$716.49 58 59 \$907.92 \$874.44 \$831.67 \$826.96 \$758.42 \$744.50 \$943.42 60 \$908.64 \$864.19 \$859.31 \$788.07 \$773.62 \$980.28 \$944.13 \$897.96 \$892.86 \$818.85 \$803.85 61 62 \$980.28 \$944.13 \$897.96 \$892.86 \$818.85 \$803.85 63 \$980.28 \$944.13 \$897.96 \$892.86 \$818.85 \$803.85

\$897.96

\$892.86

\$818.85

\$803.85

\$980.28

64+

\$944.13

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective July 1, 2016 District of Columbia Small Group Exchange Appendix III-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age		CP DC Platinum 500/20/Dental/Ped Dent	KP DC Gold 0/20/Dental/Ped Dental	DC Gold 500/20/Dental/Ped De							KP DC Silver 2500/30/10%/HSA/Dental/Ped Dent							
20 and Under		\$271.94	\$258.65	\$257.18	\$235.86	\$231.54	\$220.99	\$213.64	\$200.84	\$200.77	\$186.50	\$165.72	\$153.02	\$155.80	\$155.35	\$187.14	\$226.38	\$273.52
21	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
22	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
23	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
24	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
25	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
26	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
27	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
28	\$321.22	\$309.37	\$294.24	\$292.57	\$268.32	\$263.40	\$251.40	\$243.04	\$228.46	\$228.39	\$212.17	\$188.53	\$174.07	\$177.25	\$176.74	\$212.90	\$257.53	\$311.16
29	\$328.13	\$316.02	\$300.57	\$298.87	\$274.09	\$269.06	\$256.81	\$248.27	\$233.38	\$233.31	\$216.74	\$192.59	\$177.82	\$181.05	\$180.54	\$217.48	\$263.07	\$317.85
30	\$336.32	\$323.92	\$308.08	\$306.34	\$280.95	\$275.79	\$263.22	\$254.48	\$239.22	\$239.14	\$222.15	\$197.40	\$182.26	\$185.58	\$185.06	\$222.92	\$269.64	\$325.80
31	\$344.96	\$332.23	\$315.99	\$314.20	\$288.16	\$282.87	\$269.98	\$261.02	\$245.36	\$245.27	\$227.85	\$202.46	\$186.94	\$190.35	\$189.81	\$228.64	\$276.57	\$334.16
32	\$352.73	\$339.72	\$323.11	\$321.28	\$294.65	\$289.25	\$276.06	\$266.90	\$250.89	\$250.80	\$232.99	\$207.03	\$191.15	\$194.63	\$194.08	\$233.80	\$282.80	\$341.69
33	\$360.93	\$347.63	\$330.62	\$328.76	\$301.50	\$295.97	\$282.49	\$273.10	\$256.72	\$256.63	\$238.40	\$211.84	\$195.60	\$199.16	\$198.60	\$239.23	\$289.38	\$349.63
34	\$369.57	\$355.94	\$338.53	\$336.62	\$308.72	\$303.05	\$289.25	\$279.63	\$262.86	\$262.78	\$244.11	\$216.91	\$200.28	\$203.93	\$203.35	\$244.95	\$296.30	\$357.99
35	\$378.20	\$364.26	\$346.44	\$344.48	\$315.93	\$310.13	\$296.00	\$286.16	\$269.00	\$268.91	\$249.82	\$221.97	\$204.96	\$208.69	\$208.10	\$250.67	\$303.22	\$366.36
36	\$386.84	\$372.57	\$354.35	\$352.35	\$323.14	\$317.21	\$302.77	\$292.70	\$275.15	\$275.06	\$255.51	\$227.05	\$209.63	\$213.45	\$212.85	\$256.40	\$310.14	\$374.73
37	\$395.48	\$380.89	\$362.26	\$360.21	\$330.35	\$324.29	\$309.52	\$299.24	\$281.29	\$281.19	\$261.22	\$232.12	\$214.30	\$218.22	\$217.60	\$262.13	\$317.07	\$383.09
38	\$400.22	\$385.46	\$366.61	\$364.53	\$334.32	\$328.19	\$313.23	\$302.83	\$284.67	\$284.57	\$264.35	\$234.90	\$216.88	\$220.84	\$220.21	\$265.27	\$320.87	\$387.69
39	\$404.97	\$390.04	\$370.96	\$368.87	\$338.29	\$332.08	\$316.96	\$306.42	\$288.05	\$287.94	\$267.50	\$237.69	\$219.45	\$223.46	\$222.83	\$268.42	\$324.68	\$392.29
40	\$420.95	\$405.42	\$385.59	\$383.41	\$351.63	\$345.18	\$329.46	\$318.50	\$299.41	\$299.31	\$278.05	\$247.07	\$228.11	\$232.27	\$231.62	\$279.00	\$337.48	\$407.77
41	\$437.35	\$421.22	\$400.62	\$398.36	\$365.34	\$358.63	\$342.30	\$330.92	\$311.08	\$310.96	\$288.88	\$256.69	\$237.00	\$241.32	\$240.64	\$289.88	\$350.64	\$423.66
42	\$454.62	\$437.86	\$416.44	\$414.08	\$379.76	\$372.79	\$355.81	\$343.98	\$323.35	\$323.24	\$300.29	\$266.84	\$246.36	\$250.85	\$250.14	\$301.33	\$364.48	\$440.38
43	\$472.32	\$454.91	\$432.66	\$430.21	\$394.54	\$387.31	\$369.67	\$357.38	\$335.95	\$335.84	\$311.98	\$277.22	\$255.95	\$260.62	\$259.89	\$313.06	\$378.68	\$457.53
44	\$490.89	\$472.78	\$449.66	\$447.12	\$410.05	\$402.54	\$384.20	\$371.43	\$349.15	\$349.03	\$324.24	\$288.12	\$266.01	\$270.86	\$270.10	\$325.37	\$393.57	\$475.52
45	\$509.89	\$491.08	\$467.06	\$464.42	\$425.92	\$418.11	\$399.06	\$385.80	\$362.66	\$362.54	\$336.79	\$299.27	\$276.31	\$281.35	\$280.55	\$337.95	\$408.79	\$493.92
46	\$529.74	\$510.20	\$485.25	\$482.51	\$442.52	\$434.40	\$414.60	\$400.83	\$376.79	\$376.66	\$349.91	\$310.92	\$287.07	\$292.31	\$291.47	\$351.12	\$424.71	\$513.15
4/	\$550.47 \$572.05	\$530.16 \$550.95	\$504.23	\$501.38	\$459.82	\$451.39	\$430.83 \$447.72	\$416.50	\$391.53	\$391.40 \$406.75	\$363.60	\$323.09 \$335.75	\$298.30	\$303.74	\$302.88	\$364.86 \$379.16	\$441.33	\$533.22 \$554.14
48			\$524.01	\$521.05	\$477.85	\$469.09		\$432.84	\$406.88		\$377.86		\$310.00	\$315.65	\$314.76 \$327.11		\$458.64	\$554.14 \$575.89
49	\$594.50 \$617.82	\$572.58 \$595.03	\$544.58 \$565.93	\$541.49 \$562.73	\$496.61 \$516.08	\$487.50 \$506.61	\$465.29 \$483.54	\$449.83 \$467.47	\$422.85 \$439.43	\$422.71 \$439.28	\$392.69 \$408.08	\$348.93 \$362.62	\$322.16 \$334.80	\$328.04 \$340.90	\$327.11 \$339.94	\$394.04 \$409.50	\$476.63 \$495.33	\$575.89 \$598.47
.50	0011102	00,000	0.000		40.000	40.0000	4 100-0 1		0.103110	Q-103.000	Q 100000	0.0000	400.100	40.100.0	400000	4100100		
51	\$642.00 \$667.03	\$618.32	\$588.07 \$611.01	\$584.76 \$607.56	\$536.28 \$557.20	\$526.44 \$546.98	\$502.46 \$522.05	\$485.77 \$504.71	\$456.63 \$474.45	\$456.47	\$424.05 \$440.59	\$376.81 \$391.50	\$347.90 \$361.47	\$354.25 \$368.06	\$353.24 \$367.01	\$425.52	\$514.71 \$534.79	\$621.89 \$646.15
52	\$667.03 \$692.94	\$642.44 \$667.39	\$611.01 \$634.75	\$607.56	400.100	40.000	\$522.05 \$542.33	\$504.71 \$524.31		\$474.28 \$492.70	\$440.59 \$457.70	000.000		\$368.06 \$382.35	\$367.01 \$381.28	\$442.12 \$459.29	\$534.79 \$555.55	\$646.15 \$671.24
5.5	\$692.94 \$720.14	\$667.39 \$693.58	\$634.75 \$659.66	\$631.15 \$655.94	\$578.84 \$601.55	\$568.22 \$590.53	\$542.33 \$563.62	\$524.31 \$544.89	\$492.87 \$512.22	\$492.70 \$512.03	\$457.70 \$475.67	\$406.71 \$422.67	\$375.51 \$390.25	\$382.35 \$397.37	\$381.28 \$396.24	\$459.29 \$477.32	\$555.55 \$577.36	\$671.24 \$697.59
54	\$720.14 \$748.20	\$693.58 \$720.61	\$659.66 \$685.36	\$655.94 \$681.49	0.00100	\$590.53 \$613.54	\$563.62 \$585.58	\$544.89 \$566.12		\$512.03 \$531.99	4.1.0.0.			\$397.37	\$396.24 \$411.68	\$477.32	\$5//.36 \$599.86	\$697.59 \$724.77
55	\$748.20 \$777.56	\$720.61 \$748.88			\$625.00 \$649.53	\$613.54 \$637.60	\$585.58 \$608.56	\$566.12 \$588.34	\$532.18 \$553.05		\$494.21	\$439.15 \$456.37	\$405.46 \$421.37		\$411.68 \$427.84	\$495.91 \$515.37	4000000	
56	0111100	0.7.10100	\$712.26	\$708.23	4013100	4001100	400000			\$552.87	\$513.60	0.0000	0.000	\$429.05		40.40.0	\$623.40	\$753.21
57	\$807.78	\$778.00 \$808.35	\$739.94 \$768.81	\$735.76	\$674.76	\$662.39 \$688.23	\$632.21 \$656.88	\$611.21 \$635.05	\$574.55 \$596.96	\$574.35	\$533.56	\$474.11	\$437.74	\$445.73	\$444.46	\$535.40 \$556.30	\$647.63	\$782.49 \$813.02
58	\$839.31 \$872.11	0.000000	\$768.81 \$798.87	\$764.47 \$794.35	\$701.09		\$656.88 \$682.57	0.00-0.100	40.000	\$596.76	\$554.38 \$576.05	\$492.62	\$454.82	\$463.11 \$481.22	\$461.80 \$479.86	400000	\$672.90	\$813.02 \$844.80
59	\$872.11 \$906.22	\$839.95 \$872.80	\$798.87 \$830.11		\$728.51 \$757.00	\$715.14	\$682.57 \$709.26	\$659.88 \$685.60	\$620.31 \$644.56	\$620.10 \$644.35	\$576.05 \$598.58	\$511.87 \$531.89	\$472.61 \$491.09	\$481.22 \$500.04	\$479.86	\$578.04 \$600.65	\$699.21 \$726.55	\$844.80 \$877.84
0.0	0.00000	0.01.000		\$825.42	4.0	\$743.11	4100100	3003.07	3044.50	401100	40,000	000000	0.0.000	40.000.	3470.03	3000.00		
61	\$941.61	\$906.89 \$906.89	\$862.54	\$857.67 \$857.67	\$786.56 \$786.56	\$772.13	\$736.97	\$712.46	\$669.74 \$669.74	\$669.52	\$621.97	\$552.66	\$510.27	\$519.58	\$518.10	\$624.12	\$754.93	\$912.13 \$912.13
62	\$941.61	0,700103	\$862.54 \$862.54	\$857.67	4.0000	\$772.13	\$736.97 \$736.97	\$712.46 \$712.46		\$669.52	\$621.97 \$621.97	\$552.66	\$510.27	\$519.58	\$518.10 \$518.10	\$624.12 \$624.12	\$754.93	\$912.13
63	\$941.61 \$941.61	\$906.89 \$906.89	\$862.54 \$862.54	\$857.67 \$857.67	\$786.56 \$786.56	\$772.13 \$772.13	\$736.97 \$736.97	\$712.46 \$712.46	\$669.74 \$669.74	\$669.52 \$669.52	\$621.97 \$621.97	\$552.66 \$552.66	\$510.27 \$510.27	\$519.58 \$519.58	\$518.10 \$518.10	\$624.12 \$624.12	\$754.93 \$754.93	\$912.13 \$912.13
64+	3941.61	3500.89	3862.54	\$857.67	378b.5b	\$1/2.13	\$136.91	3/12.46	5009.74	\$009.52	\$021.97	3252.66	\$510.27	\$319.58	\$318.10	\$024.12	\$754.93	\$912.13

Rates effective July 1, 2016 District of Columbia Small Group Exchange Appendix III-B

19 20 22 23 21 24 Gold Gold Gold Platinum Gold Platinum KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel P DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$296.48 \$285.54 \$271.58 \$270.04 \$247.66 \$243.11 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 21 22 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 23 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 \$300.18 \$275.30 24 \$329.57 \$317.41 \$301.89 \$270.25 25 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 26 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 27 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 \$337.27 \$308.95 \$307.20 28 \$324.84 \$281.74 \$276.57 \$344.52 \$331.82 \$315.59 \$287.79 29 \$313.81 \$282.51 30 \$353.14 \$340.12 \$323.49 \$321.66 \$294.99 \$289.58 \$362.20 \$348.85 \$329.92 \$302.56 31 \$331.79 \$297.02 32 \$370.37 \$356.71 \$339.26 \$337.34 \$309.38 \$303.70 33 \$378.98 \$365.00 \$347.15 \$345.18 \$316.58 \$310.77 34 \$388.05 \$373.74 \$355.46 \$353,44 \$324.15 \$318.21 \$382.47 \$325.63 35 \$397.12 \$363.76 \$361.70 \$331.73 36 \$406.18 \$391.21 \$372.07 \$369.96 \$339.29 \$333.07 37 \$415.24 \$399,93 \$380.37 \$378.22 \$346.87 \$340.51 38 \$420.24 \$404.73 \$384.94 \$382,76 \$351.03 \$344.59 39 \$425.22 \$409.54 \$389.51 \$387.31 \$355.20 \$348.68 40 \$442.00 \$425.69 \$404.88 \$402.59 \$369.21 \$362,44 \$459.22 \$442.28 \$420.65 \$383.60 41 \$418.27 \$376.57 42 \$477.36 \$459.75 \$437.27 \$434.79 \$398.74 \$391.43 43 \$495.94 \$477.65 \$454.28 \$451.72 \$414.28 \$406.68 44 \$515.43 \$496.42 \$472.15 \$469.47 \$430.55 \$422.66 \$535.38 \$447.22 45 \$515.64 \$490.42 \$487.64 \$439.02 \$535.72 \$509.51 \$506.63 \$464.64 46 \$556.23 \$456.12 \$577.99 \$556.67 \$529.45 \$526.46 \$482.82 47 \$473.96 \$578.50 \$550.21 \$547.10 \$501.75 48 \$600.66 \$492.54 \$624.23 \$571.81 \$568.57 49 \$601.21 \$521.44 \$511.87 50 \$648.71 \$594.23 \$590.87 \$541.89 \$531.95 \$624.79 51 \$674.09 \$649.23 \$617.48 \$613.99 \$563.09 \$552,77 52 \$700.39 \$674.56 \$641.57 \$637.94 \$585.05 \$574.32 53 \$727.59 \$700.76 \$666.48 \$662.71 \$607.78 \$596.63 54 \$756.14 \$728.26 \$692.65 \$688.73 \$631.63 \$620.05 55 \$785.61 \$756.64 \$719.64 \$715.57 \$656.25 \$644.21 56 \$816.44 \$786.33 \$747.87 \$743.64 \$682.00 \$669.48 57 \$848.18 \$816.90 \$776.94 \$772.54 \$708.51 \$695.51 \$848.77 \$807.25 \$881.27 \$802.69 \$736.15 \$722.65 58 59 \$915.72 \$881.95 \$838.82 \$834.07 \$764.93 \$750.90 60 \$951.53 \$916.44 \$871.61 \$866.69 \$794.84 \$780.26 \$988.71 \$952.23 \$905.67 \$900.54 \$825.90 \$810.75 61 \$952.23 62 \$988.71 \$905.67 \$900.54 \$825.90 \$810.75 63 \$988.71 \$952.23 \$905.67 \$900.54 \$825.90 \$810.75

\$905.67

\$900.54

\$825.90

\$810.75

\$988.71

64+

\$952.23

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective October 1, 2016 District of Columbia Small Group Exchange Appendix IV-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Γ	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	DC Platinum 0/20/Dental/Ped D	Den P DC Platinum 500/20/Dental/Ped Den	KP DC Gold 0/20/Dental/Ped Dental	DC Gold 500/20/Dental/Ped D	P DC Gold 1000/30/Dental/Ped Den	P DC Gold 1350/0%/HSA/Dental/Ped D	ten KP DC Gold 1500/10/HSA/Dental/Ped Dental P	DC Silver 1250/35/Dental/Ped I	en P DC Silver 2000/35/Dental/Ped E	en P DC Säver 1500/30/HSA/Dental/Ped Den	KP DC Silver 2500/30/10%/HSA/Dental/Ped Denta	P DC Bronze 4500/50/Dental/Ped	Den DC Bronze 6000/30/10%/HSA/Dental/Ped De	DC Bronze 5000/20%/HSA/Dental/Ped Do	P DC Bronze 5000/20/HSA/Dental/Ped Dent	KP DC Bronze 4500/50/POS/Dental/Ped Dental	KP DC Silver 2000/35/POS/Dental/Ped Dental	KP DC Gold 1000/30/POS/Dental/Ped Dental
20 and Under	\$284.78	\$274.28	\$260.87	\$259.39	\$237.89	\$233.53	\$222.89	\$215.48	\$202.56	\$202.49	\$188.11	\$167.14	\$154.33	\$157.14	\$156.69	\$188.75	\$228.32	\$275.87
21	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
22	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
23	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
24	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
25	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
26	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
27	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
28	\$323.98	\$312.02	\$296.77	\$295.09	\$270.63	\$265.66	\$253.56	\$245.13	\$230.43	\$230.36	\$213.99	\$190.15	\$175.57	\$178.77	\$178.26	\$214.73	\$259.74	\$313.83
29	\$330.94	\$318.73	\$303.15	\$301.44	\$276.44	\$271.37	\$259.01	\$250.40	\$235.38	\$235.31	\$218.60	\$194.24	\$179.34	\$182.61	\$182.09	\$219.35	\$265.33	\$320.58
30	\$339.21	\$326.71	\$310.72	\$308.97	\$283.36	\$278.16	\$265.49	\$256.66	\$241.27	\$241.19	\$224.06	\$199.09	\$183.83	\$187.17	\$186.65	\$224.84	\$271.96	\$328.59
31	\$347.92	\$335.09	\$318.70	\$316.90	\$290.63	\$285.30	\$272.30	\$263.26	\$247.47	\$247.38	\$229.81	\$204.20	\$188.55	\$191.98	\$191.44	\$230.60	\$278.95	\$337.03
32	\$355.76	\$342.64	\$325.89	\$324.04	\$297.18	\$291.73	\$278.43	\$269.19	\$253.04	\$252.96	\$234.99	\$208.81	\$192.79	\$196.30	\$195.75	\$235.80	\$285.23	\$344.62
33	\$364.03	\$350.61	\$333.46	\$331.58	\$304.09	\$298.51	\$284.92	\$275.45	\$258.93	\$258.84	\$240.45	\$213.66	\$197.28	\$200.87	\$200.30	\$241.28	\$291.86	\$352.63
34	\$372.74	\$358.99	\$341.44	\$339.51	\$311.37	\$305.65	\$291.73	\$282.03	\$265.12	\$265.03	\$246.21	\$218.77	\$202.00	\$205.68	\$205.10	\$247.06	\$298.84	\$361.07
35	\$381.45	\$367.39	\$349.41	\$347.44	\$318.64	\$312.79	\$298.54	\$288.62	\$271.31	\$271.22	\$251.96	\$223.88	\$206.72	\$210.48	\$209.89	\$252.82	\$305.83	\$369.51
36	\$390.16	\$375.77	\$357.39	\$355.37	\$325.92	\$319.93	\$305.37	\$295.22	\$277.51	\$277.42	\$257.71	\$229.00	\$211.43	\$215.28	\$214.68	\$258.60	\$312.80	\$377.94
37	\$398.87	\$384.16	\$365.38	\$363.30	\$333.19	\$327.08	\$312.18	\$301.81	\$283.71	\$283.60	\$263.46	\$234.11	\$216.15	\$220.10	\$219.47	\$264.38	\$319.79	\$386.38
38	\$403.66	\$388.77	\$369.76	\$367.66	\$337.19	\$331.01	\$315.92	\$305.43	\$287.11	\$287.01	\$266.62	\$236.92	\$218.74	\$222.73	\$222.11	\$267.55	\$323.63	\$391.02
39	\$408.45	\$393.39	\$374.15	\$372.03	\$341.19	\$334.93	\$319.68	\$309.05	\$290.52	\$290.42	\$269.79	\$239.73	\$221.34	\$225.38	\$224.74	\$270.73	\$327.47	\$395.66
40	\$424.57	\$408.90	\$388.90	\$386.71	\$354.65	\$348.15	\$332.29	\$321.24	\$301.98	\$301.88	\$280.43	\$249.19	\$230.07	\$234.26	\$233.61	\$281.40	\$340.38	\$411.27
41	\$441.10	\$424.84	\$404.07	\$401.78	\$368.47	\$361.71	\$345.24	\$333.77	\$313.75	\$313.64	\$291.36	\$258.90	\$239.04	\$243.40	\$242.71	\$292.37	\$353.65	\$427.29
42	\$458.53	\$441.62	\$420.02	\$417.64	\$383.02	\$375.99	\$358.87	\$346.94	\$326.13	\$326.02	\$302.87	\$269.13	\$248.47	\$253.01	\$252.29	\$303.92	\$367.61	\$444.16
43	\$476.38	\$458.81	\$436.37	\$433.90	\$397.93	\$390.64	\$372.85	\$360.45	\$338.83	\$338.72	\$314.66	\$279.60	\$258.15	\$262.86	\$262.12	\$315.75	\$381.94	\$461.46
44	\$495.10	\$476.84	\$453.52	\$450.96	\$413.58	\$405.99	\$387.50	\$374.62	\$352.15	\$352.03	\$327.02	\$290.59	\$268.30	\$273.19	\$272.42	\$328.16	\$396.95	\$479.60
45	\$514.27	\$495.30	\$471.07	\$468.41	\$429.58	\$421.70	\$402.49	\$389.12	\$365.78	\$365.65	\$339.69	\$301.84	\$278.68	\$283.77	\$282.96	\$340.85	\$412.30	\$498.16
46	\$534.30	\$514.59	\$489.42	\$486.66	\$446.32	\$438.13	\$418.16	\$404.27	\$380.03	\$379.89	\$352.92	\$313.59	\$289.53	\$294.82	\$293.98	\$354.13	\$428.36	\$517.56
47	\$555.19	\$534.72	\$508.56	\$505.69	\$463.77	\$455.26	\$434.53	\$420.08	\$394.89	\$394.76	\$366.72	\$325.87	\$300.86	\$306.35	\$305.48	\$367.99	\$445.12	\$537.80
48	\$576.97	\$555.69	\$528.51	\$525.52	\$481.96	\$473.12	\$451.57	\$436.56	\$410.38	\$410.24	\$381.10	\$338.64	\$312.66	\$318.37	\$317.46	\$382.42	\$462.58	\$558.90
49	\$599.61	\$577.50	\$549.25	\$546.15	\$500.88	\$491.69	\$469.29	\$453.69	\$426.48	\$426.34	\$396.06	\$351.93	\$324.93	\$330.86	\$329.92	\$397.43	\$480.73	\$580.83
50	\$623.13	\$600.14	\$570.79	\$567.57	\$520.52	\$510.96	\$487.69	\$471.48	\$443.21	\$443.05	\$411.59	\$365.74	\$337.67	\$343.83	\$342.86	\$413.01	\$499.59	\$603.61
51	\$647.51	\$623.63	\$593.13	\$589.78	\$540.88	\$530.96	\$506.78	\$489.94	\$460.56	\$460.39	\$427.69	\$380.05	\$350.89	\$357.29	\$356.28	\$429.17	\$519.13	\$627.23
52	\$672.76	\$647.95	\$616.26	\$612.78	\$561.99	\$551.68	\$526.54	\$509.05	\$478.52	\$478.36	\$444.38	\$394.86	\$364.58	\$371.22	\$370.17	\$445.92	\$539.38	\$651.70
53	\$698.89	\$673.12	\$640.20	\$636.58	\$583.81	\$573.10	\$546.99	\$528.82	\$497.10	\$496.93	\$461.63	\$410.20	\$378.73	\$385.64	\$384.55	\$463.24	\$560.32	\$677.01
54	\$726.33	\$699.54	\$665.32	\$661.57	\$606.72	\$595.60	\$568.46	\$549.57	\$516.62	\$516.43	\$479.75	\$426.30	\$393.60	\$400.78	\$399.64	\$481.42	\$582.32	\$703.58
55	\$754.63	\$726.80	\$691.25	\$687.34	\$630.37	\$618.81	\$590.61	\$570.98	\$536.75	\$536.56	\$498.46	\$442.92	\$408.94	\$416.40	\$415.22	\$500.17	\$605.02	\$731.00
56	\$784.24	\$755.31	\$718.38	\$714.32	\$655.11	\$643.08	\$613.79	\$593.39	\$557.80	\$557.62	\$518.01	\$460.29	\$424.99	\$432.73	\$431.51	\$519.80	\$628.76	\$759.68
57	\$814.72	\$784.68	\$746.30	\$742.08	\$680.56	\$668.08	\$637.64	\$616.46	\$579.49	\$579.28	\$538.14	\$478.18	\$441.50	\$449.56	\$448.28	\$540.00	\$653.20	\$789.21
58	\$846.51	\$815.29	\$775.41	\$771.03	\$707.11	\$694.14	\$662.52	\$640.51	\$602.09	\$601.89	\$559.14	\$496.85	\$458.73	\$467.09	\$465.77	\$561.07	\$678.68	\$820.00
59	\$879.60	\$847.16	\$805.73	\$801.18	\$734.76	\$721.28	\$688.43	\$665.55	\$625.64	\$625.42	\$581.00	\$516.27	\$476.67	\$485.36	\$483.98	\$583.01	\$705.22	\$852.05
60	\$914.00	\$880.30	\$837.24	\$832.51	\$763.50	\$749.50	\$715.35	\$691.58	\$650.10	\$649.88	\$603.72	\$536.46	\$495.31	\$504.34	\$502.91	\$605.81	\$732.79	\$885.38
61	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97
62	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97
63	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97
64+	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97

Rates effective October 1, 2016 District of Columbia Small Group Exchange Appendix IV-B

19 20 22 23 21 24 Gold Gold Platinum Gold Gold Platinum KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel P DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$299.03 \$288.00 \$273.91 \$272.36 \$249.79 \$245.20 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 21 22 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 23 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 \$332.40 24 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 25 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 26 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 27 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 \$327.63 28 \$340.17 \$311.60 \$309.84 \$284.16 \$278.95 \$347.48 \$334.67 \$318.30 \$316.51 \$290.26 29 \$284.94 30 \$356.17 \$343.04 \$326.27 \$324.42 \$297.53 \$292.07 \$365.31 \$334.64 \$332.75 31 \$351.84 \$305.16 \$299.57 32 \$373.55 \$359.77 \$342.18 \$340.24 \$312.03 \$306.31 33 \$382.23 \$368.14 \$350.13 \$348.15 \$319.30 \$313.44 34 \$391.38 \$376.95 \$358.51 \$356.48 \$326.93 \$320.94 \$385.75 35 \$400.53 \$366.88 \$364.81 \$334.58 \$328.43 36 \$409.67 \$394.57 \$375.27 \$373.14 \$342.21 \$335.93 37 \$418.81 \$403.37 \$383.64 \$381.47 \$349.85 \$343.43 38 \$423.85 \$408.21 \$388.25 \$386.05 \$354.05 \$347.55 39 \$428.87 \$413.05 \$392.85 \$390.64 \$358.26 \$351.68 40 \$445.79 \$429.35 \$408.35 \$406.05 \$372.38 \$365.55 \$424.27 41 \$463.16 \$446.08 \$421.87 \$386.89 \$379.80 42 \$481.46 \$463.70 \$441.02 \$438.53 \$402.17 \$394.79 43 \$500.20 \$481.75 \$458.19 \$455.60 \$417.83 \$410.17 44 \$519.86 \$500.68 \$476.20 \$473.51 \$434.25 \$426.29 \$539.98 45 \$520.06 \$494.63 \$491.83 \$451.06 \$442.79 \$540.32 \$513.89 \$510.98 \$468.63 46 \$561.01 \$460.03 \$582.96 \$561.45 \$534.00 \$530.98 \$486.97 47 \$478.03 \$605.82 \$583.47 \$554.94 48 \$551.80 \$506.06 \$496.77 \$606.37 \$576.72 \$573.46 \$525.92 49 \$629.59 \$516.27 50 \$654.28 \$630.15 \$599.33 \$595.95 \$546.55 \$536.52 51 \$679.88 \$654.81 \$622.79 \$619.27 \$567.93 \$557.51 52 \$706.41 \$680.36 \$647.08 \$643,42 \$590.08 \$579.25 53 \$733.84 \$706.77 \$672.21 \$668.40 \$613.00 \$601.75 54 \$762.64 \$734.52 \$698.60 \$694.65 \$637.06 \$625.37 55 \$792.36 \$763.14 \$725.82 \$721.71 \$661.89 \$649.74 56 \$823.45 \$793.08 \$754.30 \$750.03 \$687.86 \$675.24 57 \$855.46 \$823.91 \$783.61 \$779.18 \$714.59 \$701.48 \$742.47 \$888.84 \$856.06 \$814.19 \$809.59 \$728.85 58 59 \$923.59 \$889.52 \$846.02 \$841.23 \$771.50 \$757.35 60 \$959.70 \$924.32 \$879.10 \$874.13 \$801.67 \$786.97 \$997.20 \$960.42 \$913.44 \$908.28 \$832.98 \$817.71 61 62 \$997.20 \$960.42 \$913.44 \$908.28 \$832.98 \$817.71 63 \$997.20 \$960.42 \$913.44 \$908.28 \$832.98 \$817.71

\$913.44

\$832.98

\$817.71

\$908.28

\$997.20

64+

\$960.42

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc.

District of Columbia

2016 Small Group Rate Filing HIOS Issuer ID 94506

HIOS Product ID 94506DC035, 94506DC036

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Actuarial Memorandum

I, John Xu, an Actuary for Kaiser Foundation Health Plan, Inc. (KFHP) am a member of the American Academy of Actuaries. I meet the qualification standards for certifying Regulatory Filings for Rates and Financial Projections for Health Plans. This Actuarial Certification applies to the attached filing for an approval of premium rates for Small Groups sold on the exchange. This actuarial memorandum documents the assumptions and sources of data pertaining to the development of Kaiser premium rates effective January 2016. It is intended to comply with the requirements outlined in the DC Health Benefit Exchange Authority's 2016 Carrier Reference Manual (April 2015, Version 1). It is not intended for any other purpose.

This rate filing applies to forms that are open to new sales and renewals. This filing does not cover grandfathered products that existed prior to March 23, 2010.

KFHP is an HMO company and offers traditional HMO copayment plans covering medical and pharmacy claims expenses. Kaiser also offers Deductible and High Deductible plans, some of which are HSA qualified and a limited number of Point of Service type plans. For purposes of regulation, these are all HMO products.

KFHP will market products to the Individual and Small Group markets through Direct Sales channels and Broker arrangements, as well as on the District of Columbia Marketplace (aka the Exchange). The products are guaranteed issue and guaranteed renewable.

I am the primary contact for this filing. My telephone number is 301-816-6349 and my email address is John.A.Xu@kp.org. Please also include Sheila Schroer on correspondence related to this filing, her email address is Sheila.A.Schroer@kp.org.

Proposed Rate Increases

The percent increase in the Market Adjusted Index Rate from 2015 to 2016 is -4.9%. The drivers of that change are shown in the table below, which contains all the components of the Market Adjusted Index Rate calculation. The numbers shown are the ratio of the 2016 to the 2015 factor, so a 1.000 indicates no impact on the rate change.

Source of Change	2016/2015
Based Period Experience	0.962
Base Period Utilization Copay	1.007
Pricing Trend	1.000
Morbidity Adjustment	0.945
Risk Adjustment Recoveries	1.047
Pent Up Demand	1.000
Reinsurance Recoveries	1.000
Reinsurance Premium	0.996
Average Age Impact	1.001
Additional EHB	0.995
Exchange Fee	1.000
Fixed Cost Adjustment	1.000
Total Market Adjusted Index Rate Change	95.1%

Plan level rate changes are shown in row 25 of Worksheet II in the URRT.

Experience Period Claims

Base period data:

The Revenue Requirement for 2016 for the new ACA plans is developed by accumulating medical and administrative expenses for essential health benefits (EHB) for non-grandfathered business in the Child-Only, Conversion, Dues Subsidy, ACA plans and Small Group lines of business incurred in 2014 including the incurred but not reported (IBNR) estimates for external expense. Allowed cost data from internal costs, fee for service claims, and prescription drug claims are trended to 2016. Allowed claims for internal services are allocated costs for medical services delivered within our integrated delivery system while allowed claims for external expenses are calculated as incurred plus member cost sharing.

Capitations:

KHFP has contracted with a dental provider to provide dental care to KFHP members. KFHP pays the provider a fixed capitation of \$1.15 PMPM to cover adult preventative. The \$1.15 PMPM is part of the base period allowed amount, shown in Exhibit 2. It is then removed as a non-Essential Health Benefit in Exhibit 3. Finally, this benefit is added back as part of the non-EHB adjustment in Exhibit 10.

Incurred Estimates on External Expense:

A common reserve tool developed and maintained by KFHP Actuarial Services is used to set KFHP's IBNR reserves. KFHP's common reserve tool uses historical claim lag averages to project anticipated future payments. IBNR levels are set for line of business and service line breakouts. Note that the IBNR applies only to KFHP's external allowed costs. Most of KFHP's expenses are internal fixed costs, which are allocated and lag in reporting is immaterial.

The completion factors used to complete the base period external claims are taken from KFHP's overall commercial line of business by type of service. The claims are incurred in 2014 and paid through 1/31/2015.

Premium:

Premium was captured for calendar year 2014 for all members in the base period single (combined Small Group and Individual) pool. There were no MLR rebates for these members in this period. For Dues Subsidy members, the whole premium was captured and not just the portion paid by the member.

Part I Unified Rate Review Template

Base Period Experience:

The base period experience in Worksheet 1 Section I and in Worksheet 2 Section III is the combined experience of the Small Group and Individual markets. The Index Rate of the Experience Period in cell G17 is taken from Exhibit 1 line 3. It is the per member per month allowed claims less non-essential health benefits from the base period. Therefore, it represents the average age of the members in the risk pool. The Index Rate for the Projection period, discussed below, is taken from Exhibit 1 Line 16.

Benefit Categories:

The benefit categories in Section II of Worksheet I are mapped based on type of service and place of treatment codes. For example:

Benefit Category	Services
Inpatient Hospital	Inpatient Facility, Inpatient Visits (Rounding), Inpatient Surgery - Non Maternity, Maternity

Outpatient Hospital	Outpatient Facility, Emergency/Urgent Care, Hospital Outpatient Other Professional, Outpatient Surgery
Professional	Diagnostic Services, Office Visits, Cardiovascular, Chemotherapy/Pharmacy, Dialysis, PT/OT/ST
Other Medical	Other Services
Capitation	Adult Preventive Dental
Prescription Drug	Pharmacy

Morbidity and Other Adjustments:

The morbidity adjustments in Section II Worksheet 1 are developed from row (14) in the attached Exhibit 1 and reflect the morbidity in the single risk pool (Small Group and Individual combined) of our expected 2016 membership. The development of these factors along with the documentation of these assumptions is included in Exhibit 7.1-7.3.

The "Other" adjustment in Section II Worksheet I is an adjustment to reflect that family contracts are limited to three dependents in 2016.

Also included in the "Other" adjustment is the base period utilization copay effect from Exhibit 4. The adjustment is necessary to convert the base period experience from an average plan allowed amount to the allowed amount for the reference plan. "Other" also includes additional EHB benefits in the projection period.

All the factors discussed above in the Morbidity and Other Adjustments are based on Small Group and Individual experience combined.

Paid to Allowed Ratio:

The Paid to Allowed Average Factor in the Projection Period in Section III of Worksheet I is an average plan factor for the plans listed in Worksheet II. It represents the change from the average benefit plan allowed amount to the average paid amount across the 2016 plans based on weightings in Worksheet 2 of the URRT.

The factor in cell v33 in Worksheet I of the URRT is calculated by weighting the plan design factors in Exhibit 10 by the projected members and allowed costs by plans in rows 81 and 100, respectively, of Worksheet II of the URRT.

Estimated Average Annual Premium per Policy:

The estimated average annual premium per policy based on the URRT and SERFF data included in the filing is \$8.013.86.

Risk Adjustment

Exhibit 7.1-7.3 documents the development of the Risk Adjustment index rate factor. The index rate is adjusted to reflect the expected change in morbidity of the members covered by these plans relative to the members in the base period data. It is also adjusted to reflect the risk adjustment receipts anticipated in the rating period based on the expect risk profile relative to the market of the Small Group line only based on DISB guidance.

Assumptions are documented regarding the current relative morbidity of KFHP's population along with the expected morbidity of the future market relative to KFHP. Growth assumptions for the market as a whole and KFHP specifically are used to calculate KFHP's 2016 expected relative morbidity to the market. This value is used to determine the expected risk adjustment impact to the market adjusted index rate.

Reinsurance

The reinsurance contribution for the Federal Reinsurance Program is included in the rate build up and shown as a factor in Exhibit 1, line (19).

Administrative Expense

Retention includes broker commissions, administrative expenses and capital contribution. Commissions are paid to Brokers of Record. The capital contribution is an amount needed to maintain and expand Kaiser's medical center facilities where members receive the majority of their health care. As a group model HMO, Kaiser owns a significant portion of the health care delivery system. In other health care delivery models, capital contributions are included in fee for service payments, whereas for Kaiser these are funded through premium rates.

Quarterly Rate Factors

Exhibit 11 contains the quarterly rate factors that will be applied to base rates for 2nd, 3rd and 4th 2016 effective dates. These adjustments are based on an annual trend of 3.5%. Kaiser reserves the right to amend this filing with new quarterly factors based on emerging experience and other subsequent events.

In order for the Index Rate in the Projection Period in Wk1 Section III of the URRT to reflect the average quarterly rate, a weighted average trend adjustment based on the assumed distribution of renewals throughout the year has been development.

	Q1	Q2	Q3	Q4	
Members	2,382	529	794	1,962	
Trend	3.5%	3.5%	3.5%	3.5%	Proj Index Adj
Months	24	27	30	33	for Small Group
	1.072	1.081	1.091	1.100	1.014

Profit and Risk Margin

As mentioned above, the capital contribution of 1.5%, shown in Exhibit 9, is an amount to maintain and expand Kaiser's medical center facilities where members receive the majority of their healthcare.

Taxes and Fees

Administrative expense has been adjusted to reflect the PCORI tax and the insurer tax that will apply in 2016. The amount is shown as percent in Exhibit 9.

Projected Loss Ratio

Based on a target admin percentage of 22.5%, which includes a 1.5% capital contribution margin, we anticipate an MLR based on federally prescribed methodology to be at least 80.4%. The MLR would be expected to be higher due to the required adjustments to both claims and premium in the prescribed methodology.

Market Adjusted Index Rate

The development of the index rate is summarized in Exhibit 1 and is based on combined experience of non-grandfathered Individual and Small Group experience as described above. The following factors along with Risk Adjustment described above have been considered in the development and are documented below.

Utilization copayment effect adjustment:

Allowed claims are grossed up for anticipated changes in the average utilization of services due to average cost sharing requirements in the base period. Member cost sharing results in lower utilization and, thus, lower allowed costs, than would otherwise occur in a zero cost share environment. An estimate based on industry standard factors has been made at the plan level to adjust our base period data to what would have been expected in a zero cost share environment in order to normalize for the utilization copayment effect. These adjustments are documented in Exhibit 4.

Demographic Adjustment:

The Demographic Adjustment shown in Exhibit 5 represents the expected change in the average member age from the base period to the projection period. Because of the lack of credible emerging experience as well as the uncertainty of the increasing mandate in 2016, we have assumed that the average age in the projection period is unchanged from the base period. However, due to slight difference in the average age between the Individual and Small group, there is a small change in the combined average age because of different growth in the Individual and Small Group members.

Embedded Pediatric Dental Adjustment:

KFHP is embedding pediatric dental benefits into its 2016 plans. KFHP will pay a dental provider a fixed per child per month capitation. Exhibit 14 shows the assumptions and development of the index rate adjustment factor to reflect the capitation on a per member per month basis by adjusting the index rate.

Trend:

The future trend numbers are based on actuarial judgment considering a mixture of expected industry trends, future fixed costs, and expected internalization of services. As an integrated health care provider, a large portion of KFHP's expenses are the costs associated with providing medical care through our centers. Therefore, the projected cost that is included in our total revenue requirement is largely based on budgeting. For traditional carriers, projected claims trends are developed to project expected costs. However, given KFHP's cost structure, KFHP's projected claims trends fall out of the development of projected budgeted costs. For 2014 to 2016, our projected total internal annualized medical expense trend for Small Group is 3.5% and is shown in Exhibit 6 of our filing.

Alternative AV Calculations

The AV calculator does not have an option for outpatient facility copay. To calculate the impact on the actuarial value of the plan for this benefit we used the alternate method described in 156.135 (b)(2). KFHP requested from a major actuarial consulting firm the national average allowed amount for outpatient facility costs in 2014. We have updated the national average allowed amount for the 2016 rate filing. To determine AVs for plans outpatient facility copays, we propose an OP Copay Converter to be used with the AV calculator. To create this converter, we compared the copay amount to the estimated average national OP facility allowed amount to calculate the implied coinsurance % for OP procedures. This coinsurance should only be applied to the OP facility cost and not the OP professional cost, which should be covered at 100%.

Plan designs have been changed to waive primary office visit copays for children younger than five. As the AV calculator does not have an adjustment to account for this benefit, we lowered the copay amount 16% by multiplying the actual copay by a factor of 0.84. For example, a \$20 primary office visit copay is entered as \$16.80. The 16% adjustment is based on KFHP data (as a proxy for standard population). Primary care utilization was divided between children under five and all other members. The data showed 16% of primary care visits were attributed to children under five. I certify the calculation to be actuarially sound.

AV Pricing Values

The rates for specific plans are calculated by multiplying plan factors times the index rate. The plan factors use industry standard data in a model from a national actuarial consulting firm, calibrated to KFHP experience to calculate the impact of the various cost share and plan elements for EHBs, including utilization copayment effect.

The reference plan used as the basis for the AV pricing values is a \$0 cost share plan valued using the same industry standard factors described above.

Exhibit 9 indicates the portion of the AV Pricing Value that is attributable to each of the allowable modifiers to the Index Rate. The plan factor shown in Exhibit 9 reflects both member cost shares and the resulting dampening of expected utilization due to those cost shares.

Network Adjustment

KFHP provides services to its members in its Signature network in its medical offices and externally with contracted providers. KFHP offers an expanded network of contracted non-KFHP physicians in its Select network. Rates for products with the Select network are adjusted by a factor of 1.05 for HMO to reflect the additional cost. This adjustment is consistent with the factor already filed in prior filings. For the POS plans, the factor is 1.04, reflecting steerage of 80% for Tier 1.

Age Factors

The age factor table used to develop age specific rates is the standard table provided by DISB.

Exhibit 12 shows the development of the age calibration factor. The development starts with the average age in the projection period from Exhibit 5. That age is rounded to the nearest age and the age factor is pulled from the DISB age curve. As described in the Actuarial Memorandum instructions, the ratio of the age factor for the nearest rounded age to the age factor for the average age in the projection period is the age calibration factor used in the rate development.

Non-EHB

An adjustment has been made to the base period allowed amount to remove the Non-EHB benefits from the Index Rate. This multiplier was calculated by summing the allowed amount for Non-EHB benefits in the base period and adding the adult preventive dental capitation and then dividing by total allowed.

Additional URRT Items

Membership Projections:

The total membership projection included across new plans in Section II of Worksheet 2 is consistent with KFHP's business plan. Detailed assumptions are presented and documented in Exhibit 7.1-7.3.

An assumption is made in Worksheet 2 as to the distribution of members by product based on KFHP's expected distribution of membership by metal level.

Terminated Plans:

The following non-grandfathered plans are included in the "Terminate Plans" column in Worksheet 2 of the URRT.

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DC Added Choice POS Plan 1 ($5/$10)
DC Added Choice POS Plan 2 ($15/$25)
DC DHMO Plan 1 ($10/$20/$250 Ded - 90%)
DC DHMO Plan 2 ($15/$25/$500 Ded - 90%)
DC DHMO Plan 3 ($25/$35/$2,000 Ded - 80%)
DC DHMO Plan 4 ($25/$35/$1000 Ded - 80%)
DC Flex Choice Plan 1 (100/90/70 - $10-$20 OV)
DC Flex Choice Plan 2 (100/80/60 - $15-$25 OV)
DC Flex Choice Plan 3 (100/70/50 - $25-$35 OV)
DC Flex Choice Plan 4 (100/80/60 - $10-$25 OV)
DC Flex Choice Plan 4 (100/80/60 - $10-$25 OV)
DC HDHP Plan 1 ($1,250 Ded - 80%)
DC HDHP Plan 2 ($1,750 Ded - 70%)
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DC HDHP Plan 3 ($2,250 Ded – 70%)
DC HDHP Plan 4 ($1,250 Ded - 100%)
DC HDHP Plan 5 ($2,250 Ded - 100%)
DC HDHP Plan 8 ($2,800 Ded - 100%)
DC HMO Plan 1 ($5/$10/$0 IP/$0 Rx Ded)
DC HMO Plan 2 ($10/$20/$0 IP/$0 Rx Ded)
DC HMO Plan 3 ($15/$25/$0 IP/$0 Rx Ded)
DC HMO Plan 4 ($15/$30/$500 IP/$0 Rx Ded)
DC HMO Plan 5 ($20/$30/$250 IP/$0 Rx Ded)
DC HMO Plan 6 ($20/$40/20% IP/$0 Rx Ded)
DC HMO Plan 7 ($10/$10/$250 IP/$0 Rx Ded)
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Warning Alert:

There are no warning alerts in Wk2 of the URRT

DC HMO Plan 8 (\$20/\$20/\$500 IP/\$0 Rx Ded)

Summary Rate Calculation

Exhibit 1 shows the development of the Market Adjusted Index Rate from the base period Medical Cost Data. The Plan Adjusted Index Rates are calculated using the Market Adjusted Index Rate and the allowable plan adjustment factors in Exhibit 9. The final 2016 Consumer Adjusted Premium Rates are developed by applying the age slope and age calibration to the Plan Adjusted Index Rates to generate age specific rates.

Exhibit Table of Contents:

The following exhibits are included in this filing:

- Exhibit 1 Market Adjusted Index Rate Calculation
- Exhibit 2 Allowed Claims Development
- Exhibit 3 –Non-EHB Adjustments
- Exhibit 4 Utilization Copayment Effect Adjustments
- Exhibit 5 Demographic Adjustment
- Exhibit 6 Trend Factor
- Exhibits 7.1 Risk Adjustment and Morbidity Development Combined Small and Individual
- Exhibits 7.2 Risk Adjustment and Morbidity Development Individual Line of Business
- Exhibits 7.3 Risk Adjustment and Morbidity Development Small Group Line of Business
- Exhibit 8 Administrative Expense
- Exhibit 9 Plan Adjusted Index Rates Development
- Exhibit 10 AV Calculator Values
- Exhibit 11 Quarterly Rate Factors
- Exhibit 12 Age Calibration
- Exhibit 13 Age Factors
- Exhibit 14 Pediatric Dental Adjustment Factor
- Appendix I-A 1st Quarter 2016 Signature Network Rate Sheet
- Appendix I-B 1st Quarter 2016 Select Network Rate Sheet
- Appendix II-A 2nd Quarter 2016 Signature Network Rate Sheet
- Appendix II-B 2nd Quarter 2016 Select Network Rate Sheet
- Appendix III-A 3rd Quarter 2016 Signature Network Rate Sheet
- Appendix III-B 3rd Quarter 2016 Select Network Rate Sheet
- Appendix IV-A 4th Quarter 2016 Signature Network Rate Sheet
- Appendix IV-B 4th Quarter 2016 Select Network Rate Sheet

Certification

This filing is in conformity with all applicable Actuarial Standards of Practice, including ASOP No. 8. To the best of my knowledge, the rating methodologies of Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. and the development of the Index Rate comply with the applicable District and Federal Statutes and Regulations (45 CFR 156.80(d)(1). The percent of total premium that represents essential health benefits included in Worksheet 2, Sections III and IV were calculated in accordance with actuarial standards of practice. The index rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan level rates. The rating methodologies produce premiums that are reasonable in relation to benefits being provided and the populations being covered and are based on sound and commonly accepted actuarial principles and are neither excessive nor deficient.

John Xu, FSA, MAAA Actuarial Manager

Kaiser Foundation Health Plan, Inc.

5/1/2015

Index Rate Development Summary Index Rate Calculation Exhibit 1

			<u>Source</u>
(1)	Base Period Allowed	\$321.92	Exhibit 2
(2)	Non-EHB Claims Adjustment	0.983	Exhibit 3
(3)	Experience Period Index Rate	\$316.58	(1) * (2)
(4)	Product/Network Adjustment	1.000	
(5)	Adjusted Base Period Allowed	\$316.58	(1) * (2)
(6)	Base Period Utilization Adjustment	1.096	Exhibit 4
(7)	Projection Period Utilization Adjustment	0.906	
(8)	Demographic Adjustment	0.997	Exhibit 5
(9)	Product/Network Moribidty Adjustment	1.000	
(10)	Additional EHB (including Ped Dental)	1.007	Exhibit 14
(10)	Annualized Trend	3.5%	Exhibit 6
(11)	Months of Trend	24	
(12)	Trend Factor	1.071	{1 + (10)} ^{ (11) / 12}
(14)	Change in Morbidity	0.992	Exhibit 7
(15)	Contract Limit of 3 Children Factor	1.005	
(16)	Combined Projection Period Index Rate Prior to Separate Modifiers	336.41	(5) * (6) * (7) * (8) * (9) * (10) * (12) * (13) * (14) * (15)
(17)	Risk Adjustment	1.001	Exhibit 7
(18)	Exchange fee	1.000	
(19)	Reinsurance Premium	1.0067	
(20)	Market Adjusted Index Rate	\$338.87	(16) * (17) * (18) * (19)

Allowed Claims Development Exhibit 2

Current Pool	Current Plans	Member Months	Total
Individual	All	20,558	\$320.97
Small Group	All	34,232	\$322.49
Grand Total		54,790	\$321.92

Non-EHB Adjustments Exhibit 3

Current Pool	Current Plans	Member Months	Non-EHB PMPM
Individual	All	20,558	\$5.34
Small Group	All	34,232	\$5.34
Grand Total		54,790	\$5.34

Multplier to Remove Non-EHB [1 - (Non-EHB PMPM / Allowed PMPM)]	0.9834

Utilization Copayment Effect Adjustment Exhibit 4

Current Pool	Current Plan	Member Months	Allowed Amount	Copay Impact
Individual	All	20,558	\$320.97	0.900
Small Group	All	34,232	\$322.49	0.920
Grand Total		54,790	\$321.92	0.913

Adjustment Factor is the Inverse of the Total 1.096

Demographic Adjustment Exhibit 5

		Member Months	Average Age Factor ¹	Weighed Average Age ²
Experience Period	Individual	20558	1.0559	42.1
	Small Group	34232	0.9953	40.5
	Combined	54790	1.0180	41.1
Projection Period	Individual	31598	1.0559	42.1
	Small Group	68016	0.9953	40.5
	Combined	99614	1.0145	41.0
Demographic Factor			0.9965	

Average age factor based on CMS Age curve

Weighted Average Age = Interpolation on age curve of average age factor

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Exhibit 6 Trend Calculation

		2014 to 2016 Annualized
Category	Weight	Trend
Inpatient Hospital	20.6%	3.5%
Outpatient Hospital	16.1%	5.5%
Professional	46.2%	2.0%
Other	2.4%	3.5%
Prescription Drug	14.5%	6.0%
Capitation	0.3%	0.0%
Composite	100.0%	3.5%

Risk Adjustment and Morbidity Development Exhibit 7.1

Development of Risk Adjustment Factor Applied to Index Rate

	<u>Small</u>	<u>Individual</u>	<u>1 otai</u>
Average Members	5,668	2,633	8,301
Adjustment for change in risk in Kaiser membership	100.0%	97.5%	99.21%
Adjustment for risk adjustment recoveries	100.0%	97.0%	

Risk Adjustment and Morbidity Development Exhibit 7.2

Current Risk Profile of Non-Grandfathered Kaiser members relative to current market

	CY 2013 Member Months	<u>Morbidity</u>
(1) Non-Grandfathered Guaranteed Issue	12	1.401
(2) Non-Grandfathered Medically Underwritten and ACA plans	20,530	1.050
(3) Dues Subsidy	16	1.274
(4) Total	20,558	1.050

Impact of projected membership to Kaiser risk profile in 2016 relative to current market

	Member Months	Morbidity
(5) Current Members [from (4) above]	20,558	1.050
(6) Gender to Unisex Selection Adjustment	20,530	1.000
(7) Total Mobidity Change	20,558	1.050
(8) New Entrants previoulsy uninsured	5,520	0.950
(9) Transfers from other carriers or other KP Segments	5,520	1.000
(10) Subtotal	31,598	1.024

Impact to Current Market from all new entrants in 2016

	Member Months	Risk Relativity
(11) Current Market	360,000	1.000
(12) Uninsured New Entrants	70,554	0.950
(13) Transfers from Group	70,554	1.000
(14) 2015 Market	501,108	0.993
(15) Kaiser risk relativity to 2016 market [$(10)/(14)$]		1.031
(16) Pent Up Demand Factor for New Entrants		1.000
(17) Adjustment for change in risk in Kaiser membership [(10) / (4)]		97.5% 97.0%
(18) Adjustment for risk adjustment recoveries [1/(15)]	mamal / (10) mama l l	,
(19) Adjustment for Pent Up Demand [{ (8) mems * (16) + (5) mems + (9) 1	nems } / (10) mems }]	100.0%
(20) Risk Adjustment fee 1.75/12/ Average Baf / Plan Index Rate		1.0006
(21) Adjustment for net risk adjustment [(18) * (20)]		97.0%

Risk Adjustment Factor Exhibit 7.3

Current Risk Profile of Non-Grandfathered Kaiser members relative to current market

	CY 2013 Member Months	<u>Morbidity</u>
(1) Non-Grandfathered ¹	34,212	1.050
Impact of projected membership to Kaiser	risk profile in 2015 relative to curi	ent market
	Members Months	<u>Morbidity</u>
(2) Current Members [from (4) above]	34,212	1.050
(3) New to Kaiser	3,048	1.000
(4) Subtotal	37,260	1.046
	Member Months	
(5) 2015 Market	568,490	1.000
(6) Kaiser risk relativity to 2015 market [(4) / ([5)]	1.046
Development of Risk Adjustment Factor Ap	oplied to Index Rate	
(7) Adjustment for change in risk in Kaiser member	ership [(4) / (1)]	99.6%
(8) Adjustment for risk adjustment recoveries [1 /	(6)]	95.6%
(9) Total Adjustment [(7) * (8)]		95.2%

¹ Current Kaiser portfolio is expected to be 1.05 to market.

Administrative Expense Factor - Small Group Exhibit 8

Retention Category	Percent of Retention
Claims Processing	1.72%
Customer Service	0.95%
Taxes	2.88%
Capital Contribution	1.50%
Member Communication Materials	0.54%
Open Enrollment	0.84%
Utilization Review	2.31%
Care Management	0.46%
Ad Hoc Reports	0.00%
Other - Community Service	1.13%
Corporate and Other Overhead	4.43%
Commissions	5.75%
Total	22.51%

Plan Adjusted Index Rates Exhibit 9

			Allowable Plan Modifiers			Plan Adjusted		
Plans	Metallic Level	Name	Plan Design	Network Factor	Utilization Copay Effect	Non-EHB	Admin	Index Rate
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	0.951	1.000	0.9225	1.0169	1.2905	430.58
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	0.895	1.000	0.9433	1.0169	1.2905	414.70
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	0.901	1.000	0.8913	1.0169	1.2905	394.41
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	0.862	1.000	0.9264	1.0169	1.2905	392.18
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	0.810	1.000	0.9043	1.0169	1.2905	359.67
6	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental	0.800	1.000	0.8993	1.0169	1.2905	353.08
7	Gold	KP DC Gold 1500/10/HSA/Dental/Ped Dental	0.774	1.000	0.8869	1.0169	1.2905	336.99
8	Silver	KP DC Silver 1250/35/Dental/Ped Dental	0.735	1.000	0.9022	1.0169	1.2905	325.79
9	Silver	KP DC Silver 2000/35/Dental/Ped Dental	0.699	1.000	0.8917	1.0169	1.2905	306.25
10	Silver	KP DC Silver 1500/30/HSA/Dental/Ped Dental	0.710	1.000	0.8784	1.0169	1.2905	306.15
11	Silver	KP DC Silver 2500/30/10%/HSA/Dental/Ped Dental	0.675	1.000	0.8577	1.0169	1.2905	284.41
12	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	0.604	1.000	0.8525	1.0169	1.2905	252.72
13	Bronze	KP DC Bronze 6000/30/10%/HSA/Dental/Ped Dental	0.592	1.000	0.8029	1.0169	1.2905	233.33
14	Bronze	KP DC Bronze 5000/20%/HSA/Dental/Ped Dental	0.588	1.000	0.8234	1.0169	1.2905	237.59
15	Bronze	KP DC Bronze 5000/20/HSA/Dental/Ped Dental	0.586	1.000	0.8234	1.0169	1.2905	236.91
16	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	0.690	1.000	0.8428	1.0169	1.2905	285.39
17	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	0.794	1.000	0.8857	1.0169	1.2905	345.21
18	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	0.927	1.000	0.9162	1.0169	1.2905	417.09
19	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	0.951	1.050	0.9225	1.0169	1.2905	452.10
20	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	0.895	1.050	0.9433	1.0169	1.2905	435.43
21	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	0.901	1.050	0.8913	1.0169	1.2905	414.13
22	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	0.862	1.050	0.9264	1.0169	1.2905	411.79
23	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	0.810	1.050	0.9043	1.0169	1.2905	377.66
24	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel	0.800	1.050	0.8993	1.0169	1.2905	370.73

AV Calculator Values Exhibit 10

Plans	Metallic Level	Name	AV Value
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	0.920
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	0.888
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	0.819
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	0.817
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	0.796
6	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental	0.816
7	Gold	KP DC Gold 1500/10/HSA/Dental/Ped Dental	0.784
8	Silver	KP DC Silver 1250/35/Dental/Ped Dental	0.714
9	Silver	KP DC Silver 2000/35/Dental/Ped Dental	0.703
10	Silver	KP DC Silver 1500/30/HSA/Dental/Ped Dental	0.716
11	Silver	KP DC Silver 2500/30/10%/HSA/Dental/Ped Dental	0.687
12	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	0.620
13	Bronze	KP DC Bronze 6000/30/10%/HSA/Dental/Ped Dental	0.609
14	Bronze	KP DC Bronze 5000/20%/HSA/Dental/Ped Dental	0.619
15	Bronze	KP DC Bronze 5000/20/HSA/Dental/Ped Dental	0.617
16	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	0.620
17	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	0.703
18	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	0.796
19	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	0.920
20	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	0.888
21	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	0.819
22	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	0.817
23	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	0.796
24	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel	0.816

Quarterly Rate Factors Exhibit 11

Plans	Metallic Level	Name	2Q 2016	3 Q 2016	4 Q 2016
1	Platinum	KP DC Platinum 0/20/Dental/Ped Dental	1.009	1.017	1.026
2	Platinum	KP DC Platinum 500/20/Dental/Ped Dental	1.009	1.017	1.026
3	Gold	KP DC Gold 0/20/Dental/Ped Dental	1.009	1.017	1.026
4	Gold	KP DC Gold 500/20/Dental/Ped Dental	1.009	1.017	1.026
5	Gold	KP DC Gold 1000/30/Dental/Ped Dental	1.009	1.017	1.026
6	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental	1.009	1.017	1.026
7	Gold	KP DC Gold 1500/10/HSA/Dental/Ped Dental	1.009	1.017	1.026
8	Silver	KP DC Silver 1250/35/Dental/Ped Dental	1.009	1.017	1.026
9	Silver	KP DC Silver 2000/35/Dental/Ped Dental	1.009	1.017	1.026
10	Silver	KP DC Silver 1500/30/HSA/Dental/Ped Dental	1.009	1.017	1.026
11	Silver	KP DC Silver 2500/30/10%/HSA/Dental/Ped Dental	1.009	1.017	1.026
12	Bronze	KP DC Bronze 4500/50/Dental/Ped Dental	1.009	1.017	1.026
13	Bronze	KP DC Bronze 6000/30/10%/HSA/Dental/Ped Dental	1.009	1.017	1.026
14	Bronze	KP DC Bronze 5000/20%/HSA/Dental/Ped Dental	1.009	1.017	1.026
15	Bronze	KP DC Bronze 5000/20/HSA/Dental/Ped Dental	1.009	1.017	1.026
16	Bronze	KP DC Bronze 4500/50/POS/Dental/Ped Dental	1.009	1.017	1.026
17	Silver	KP DC Silver 2000/35/POS/Dental/Ped Dental	1.009	1.017	1.026
18	Gold	KP DC Gold 1000/30/POS/Dental/Ped Dental	1.009	1.017	1.026
19	Platinum	KP DC Platinum 0/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
20	Platinum	KP DC Platinum 500/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
21	Gold	KP DC Gold 0/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
22	Gold	KP DC Gold 500/20/Dental/Ped Dental/Sel	1.009	1.017	1.026
23	Gold	KP DC Gold 1000/30/Dental/Ped Dental/Sel	1.009	1.017	1.026
24	Gold	KP DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel	1.009	1.017	1.026

Age Calibration Factor Exhibit 12

	Weighted Averge Age	Age Factor
Average Age in the Projection Period	41.0	1.015
Nearest Rounded Age	41.0	1.013
Calibration Factor		0.999

Age Factors Exhibit 13

Age	Age Slope	Age Factor Indexed to Age 21
20	0.654	0.90
21	0.727	1.00
22	0.727	1.00
23	0.727	1.00
24	0.727	1.00
25	0.727	1.00
26	0.727	1.00
27	0.727	1.00
28	0.744	1.02
29	0.76	1.05
30	0.779	1.07
31	0.799	1.10
32	0.817	1.12
33	0.836	1.15
34	0.856	1.18
35	0.876	1.20
36	0.896	1.23
37	0.916	1.26
38	0.927	1.28
39	0.938	1.29
40	0.975	1.34
41	1.013	1.39
42	1.053	1.45
43	1.094	1.50
44	1.137	1.56
45	1.181	1.62
46	1.227	1.69
47	1.275	1.75
48	1.325	1.82
49	1.377	1.89
50	1.431	1.97
51	1.487	2.05
52	1.545	2.13
53	1.605	2.21
54	1.668	2.29
55	1.733	2.38
56	1.801	2.48
57	1.871	2.57
58	1.944	2.67
59	2.02	2.78
60	2.099	2.89
61	2.181	3.00
62	2.181	3.00
63	2.181	3.00
64+	2.181	3.00

Pediatric Dental Factor Development Exhibit 14

Current Pool	Current Plan	Member Months	Ped Dental Factor
Individual	All	20,558	1.002
Small Group	All	34,232	1.009
Grand Total		54,790	1.007

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective January 1, 2016 District of Columbia Small Group Exchange Appendix 1-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age		tal KP DC Platinum 500/20/Dental/Ped Dental	KP DC Gold 0/20/Dental Ped Dental	CP DC Gold 500/20/Dental/Ped De	nt KP DC Gold 1000/30/Dental/Ped Den	tal KP DC Gold 1350/0%/HSA/Dental Ped Dental			KP DC Silver 2000/35/Dental/Ped D			KP DC Bronze 4500/50/Dental/Ped Dental	KP DC Brouze 6600/30/10%/HSA/Dental/Ped Dental	KP DC Bronze 5000/20%/ISA/Dental/Ped Dent		DC Broom 4500/50/POS/Dontal/Ped De		KP DC Gold 1000/30/POS/Dental/Ped Dental
20 and Under	\$277.57	\$267.33	\$254.26	\$252.82	\$231.86	\$227.61	\$217.24	\$210.02	\$197.43	\$197.36	\$183.34	\$162.91	\$150.42	\$153.16	\$152.72	\$183.97	\$222.54	\$268.88
21	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
22	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
23	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
24	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
25	\$308.55	\$297.17	\$282.64	\$281.04	\$257.74	\$253.01	\$241.49	\$233.46	\$219.46	\$219.39	\$203.81	\$181.10	\$167.21	\$170.26	\$169.77	\$204.51	\$247.38	\$298.89
26	\$308.55 \$308.55	\$297.17 \$297.17	\$282.64 \$282.64	\$281.04 \$281.04	\$257.74 \$257.74	\$253.01 \$253.01	\$241.49 \$241.49	\$233.46 \$233.46	\$219.46 \$219.46	\$219.39 \$219.39	\$203.81 \$203.81	\$181.10 \$181.10	\$167.21 \$167.21	\$170.26 \$170.26	\$169.77 \$169.77	\$204.51 \$204.51	\$247.38 \$247.38	\$298.89 \$298.89
27	\$308.55	\$304.12	\$282.04 \$289.25	\$281.04 \$287.61	\$257.74	\$253.01 \$258.93	\$241.49 \$247.14	\$233.46 \$238.92	\$219.46 \$224.59	\$219.39 \$224.52	\$203.81 \$208.57	\$181.10	\$167.21 \$171.12	\$170.26	\$173.74	\$204.51	\$247.38 \$253.16	\$298.89 \$305.88
28	\$313.77	\$310.66	\$289.25 \$795.47	\$287.01	\$263.77	\$258.93 \$264.50	\$247.14 \$252.45	\$238.92	\$224.59 \$229.42	\$224.52 \$229.35	\$208.57 \$213.06	\$183.33 \$189.32	\$171.12 \$174.80	\$174.24	\$173.74 \$177.48	\$209.29	\$253.16 \$258.61	\$305.88 \$312.46
29	\$330.62	\$318.43	\$293.47 \$302.85	\$301.14	\$276.18	\$271.11	\$252.45 \$258.76	\$250.16	\$235.16	\$235.08	\$218.38	\$194.05	\$179.17	\$182.43	\$181.92	\$219.14	\$265.07	\$312.40 \$320.27
30	\$330.02	\$318.43 \$326.60	\$310.63	\$301.14	\$270.18	\$271.11	\$258.76 \$265.40	\$250.16	\$233.10 \$241.20	\$235.08 \$241.11	\$218.38	\$194.05	\$179.17 \$183.77	\$182.43 \$187.12	\$181.92 \$186.59	\$219.14 \$224.76	\$265.07 \$271.88	\$320.27 \$328.49
31	\$346.75	\$333.96	\$317.63	\$315.83	\$289.65	\$284.34	\$203.40 \$271.38	\$262.37	\$241.20	\$246.55	\$229.04	\$203.52	\$183.77	\$191.33	\$190.39	\$229.83	\$278.00	\$328.49 \$335.89
32	\$354.81	\$333.90 \$341.73	\$317.03 \$325.01	\$323.18	\$296.39	\$290.95	\$271.38 \$277.70	\$268.47	\$252.37	\$252.28	\$234.36	\$203.32 \$208.25	\$197.71	\$191.33	\$190.79	\$235.17	\$284.47	\$343.70
34	\$363.30	\$349.90	\$332.79	\$330.91	\$303.48	\$297.91	\$284.34	\$274.89	\$258.40	\$258.32	\$239.97	\$213.23	\$196.88	\$200.47	\$199.00	\$240.80	\$291.27	\$351.92
35	\$371.79	\$358.08	\$340.56	\$338.64	\$310.57	\$304.87	\$290.98	\$281.31	\$264.44	\$264.35	\$245.58	\$218.21	\$201.48	\$205.47	\$204.57	\$246.42	\$298.08	\$360.15
36	\$380.28	\$366.25	\$348.34	\$346.37	\$317.66	\$311.83	\$297.63	\$287.74	\$270.48	\$270.39	\$251.18	\$223.20	\$206.07	\$209.83	\$209.24	\$252.05	\$304.88	\$368.37
37	\$388.77	\$374.43	\$356.12	\$354.10	\$324.75	\$318.79	\$304.27	\$294.16	\$276.52	\$276.42	\$256.79	\$228.18	\$210.67	\$214.52	\$213.91	\$257.68	\$311.69	\$376.59
38	\$393.43	\$378.92	\$360.39	\$358.35	\$328.65	\$322.62	\$307.92	\$797.69	\$279.84	\$279.74	\$259.87	\$230.92	\$213.20	\$217.09	\$216.48	\$260.77	\$315.43	\$381.11
30	\$398.10	\$383.42	\$364.67	\$362.61	\$332.55	\$326.45	\$311.58	\$301.22	\$283.16	\$283.06	\$262.96	\$233.66	\$215.73	\$219.67	\$219.05	\$263.87	\$319.17	\$385.64
40	\$413.81	\$398.54	\$379.05	\$376.91	\$345.67	\$339.33	\$323.87	\$313.10	\$294.33	\$294.23	\$273.33	\$242.88	\$224.24	\$228.33	\$227.69	\$274.27	\$331.76	\$400.85
41	\$429.93	\$414.08	\$393.83	\$391.60	\$359.14	\$352.55	\$336.49	\$325.31	\$305.80	\$305.69	\$283.98	\$252.34	\$232.98	\$237.23	\$236.56	\$284.96	\$344.69	\$416.47
42	\$446.91	\$430.43	\$409.38	\$407.06	\$373.32	\$366.47	\$349.78	\$338.15	\$317.87	\$317.76	\$295.20	\$262.31	\$242.18	\$246.60	\$245.90	\$296.22	\$358.30	\$432.91
43	\$464.31	\$447.19	\$425.32	\$422.91	\$387.85	\$380.74	\$363.40	\$351.32	\$330.25	\$330.14	\$306.69	\$272.52	\$251.61	\$256.20	\$255.48	\$307.75	\$372.26	\$449.77
44	\$482.56	\$464.76	\$442.03	\$439.54	\$403.10	\$395.71	\$377.68	\$365.13	\$343.23	\$343.11	\$318.74	\$283.23	\$261.50	\$266.27	\$265.52	\$319.85	\$386.89	\$467.45
45	\$501.24	\$482.75	\$459.14	\$456.54	\$418.70	\$411.02	\$392.29	\$379.26	\$356.51	\$356.39	\$331.08	\$294.19	\$271.62	\$276.58	\$275.79	\$332.22	\$401.86	\$485.54
46	\$520.76	\$501.55	\$477.02	\$474.33	\$435.01	\$427.03	\$407.57	\$394.03	\$370.40	\$370.27	\$343.98	\$305.65	\$282.20	\$287.35	\$286.53	\$345.16	\$417.51	\$504.45
47	\$541.13	\$521.17	\$495.68	\$492.88	\$452.02	\$443.73	\$423.52	\$409.44	\$384.89	\$384.76	\$357.43	\$317.61	\$293.24	\$298.59	\$297.74	\$358.67	\$433.84	\$524.18
48	\$562.35	\$541.61	\$515.12	\$512.21	\$469.75	\$461.13	\$440.13	\$425.50	\$399.98	\$399.85	\$371.45	\$330.06	\$304.74	\$310.30	\$309.42	\$372.73	\$450.86	\$544.74
49	\$584.42	\$562.87	\$535.34	\$532.31	\$488.19	\$479.23	\$457.40	\$442.20	\$415.68	\$415.54	\$386.03	\$343.01	\$316.70	\$322.48	\$321.56	\$387.36	\$468.55	\$566.12
50	\$607.34	\$584.94	\$556.33	\$553.19	\$507.33	\$498.02	\$475.34	\$459.54	\$431.98	\$431.83	\$401.16	\$356.47	\$329.12	\$335.12	\$334.17	\$402.55	\$486.93	\$588.32
51	\$631.11	\$607.83	\$578.10	\$574.84	\$527.18	\$517.51	\$493.94	\$477.53	\$448.89	\$448.73	\$416.86	\$370.42	\$342.00	\$348.24	\$347.25	\$418.30	\$505.98	\$611.34
52	\$655.72	\$631.54	\$600.65	\$597.26	\$547.75	\$537.70	\$513.20	\$496.15	\$466.40	\$466.24	\$433.12	\$384.86	\$355.34	\$361.82	\$360.79	\$434.62	\$525.72	\$635.19
53	\$681.19	\$656.07	\$623.98	\$620.45	\$569.02	\$558.58	\$533.13	\$515.42	\$484.51	\$484.34	\$449.94	\$399.81	\$369.14	\$375.87	\$374.81	\$451.50	\$546.13	\$659.86
54	\$707.93	\$681.82	\$648.47	\$644.81	\$591.35	\$580.51	\$554.06	\$535.65	\$503.53	\$503.35	\$467.60	\$415.50	\$383.63	\$390.63	\$389.52	\$469.22	\$567.57	\$685.76
55	\$735.51	\$708.39	\$673.74	\$669.93	\$614.40	\$603.13	\$575.65	\$556.52	\$523.15	\$522.97	\$485.83	\$431.70	\$398.58	\$405.85	\$404.70	\$487.50	\$589.69	\$712.48
56	\$764.37	\$736.18	\$700.18	\$696.22	\$638.51	\$626.79	\$598.24	\$578.36	\$543.67	\$543.49	\$504.89	\$448.63	\$414.22	\$421.77	\$420.58	\$506.63	\$612.83	\$740.44
57	\$794.08	\$764.80	\$727.39	\$723.28	\$663.32	\$651.16	\$621.49	\$600.84	\$564.81	\$564.61	\$524.51	\$466.07	\$430.32	\$438.17	\$436.92	\$526.32	\$636.65	\$769.22
58	\$825.07	\$794.64	\$755.77	\$751.50	\$689.20	\$676.56	\$645.74	\$624.28	\$586.84	\$586.64	\$544.98	\$484.26	\$447.11	\$455.26	\$453.97	\$546.86	\$661.49	\$799.23
59	\$857.32	\$825.70	\$785.32	\$780.88	\$716.15	\$703.01	\$670.99	\$648.69	\$609.79	\$609.58	\$566.28	\$503.19	\$464.59	\$473.06	\$471.72	\$568.24	\$687.35	\$830.47
60	\$890.85	\$858.00	\$816.03	\$811.42	\$744.16	\$730.51	\$697.23	\$674.06	\$633.63	\$633.42	\$588.43	\$522.87	\$482.76	\$491.56	\$490.17	\$590.46	\$714.23	\$862.95
61	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66
62	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66
63	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66
64+	\$925.65	\$891.51	\$847.91	\$843.12	\$773.22	\$759.03	\$724.47	\$700.38	\$658.38	\$658.16	\$611.42	\$543.29	\$501.62	\$510.77	\$509.31	\$613.53	\$742.13	\$896.66

Rates effective January 1, 2016 District of Columbia Small Group Exchange Appendix I-B

19 20 22 23 21 24 Gold Platinum Gold Gold Gold Platinum Age KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel KP DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$291.45 \$280.70 \$266.97 \$265.46 \$243.46 \$238.99 \$295.09 \$323.98 \$312.03 \$296.77 \$270.63 \$265.67 21 22 \$323.98 \$312.03 \$296.77 \$295.09 \$270.63 \$265.67 23 \$323.98 \$312.03 \$296,77 \$295.09 \$270.63 \$265.67 \$323.98 \$270.63 24 \$312.03 \$296.77 \$295.09 \$265.67 25 \$323.98 \$312.03 \$296.77 \$295.09 \$270.63 \$265.67 26 \$323.98 \$312.03 \$296,77 \$295.09 \$270.63 \$265.67 27 \$323.98 \$312.03 \$296.77 \$295.09 \$270.63 \$265.67 \$301.99 28 \$331.55 \$319.33 \$303.71 \$276.96 \$271.88 \$338.68 \$326.19 \$310.24 \$308.49 \$282.91 \$277.72 29 \$347.15 \$334.35 \$318.00 \$316.20 \$289.99 \$284.67 30 \$342.93 \$326.16 \$324.32 \$297.43 31 \$356.06 \$291.98 \$364.09 \$350.66 \$333.51 \$331.62 \$304.13 \$298.55 32 33 \$372.55 \$358.81 \$341.26 \$339.33 \$311.21 \$305.50 34 \$381.47 \$367.40 \$349.43 \$347.45 \$318.65 \$312.81 \$390.38 \$375.98 \$357.59 \$355.57 \$326.10 35 \$320.11 36 \$399.29 \$384.57 \$365.76 \$363.69 \$333.54 \$327.42 37 \$408.20 \$393.15 \$373.92 \$371.81 \$340.99 \$334.73 38 \$413.11 \$397.87 \$378.41 \$376.27 \$345.08 \$338.75 39 \$418.01 \$402.59 \$382.90 \$380.74 \$349.18 \$342.77 40 \$434.50 \$418.47 \$398.01 \$395.76 \$362.95 \$356.29 \$451.43 \$434.78 \$413.52 \$411.18 \$377.09 41 \$370.18 42 \$469.26 \$451.95 \$429.85 \$427.42 \$391.98 \$384.79 \$487.53 \$446.58 \$407.25 43 \$469.55 \$444.06 \$399.78 44 \$506.69 \$488.00 \$464.14 \$461.51 \$423.25 \$415.49 \$482.10 \$479.37 \$439.63 45 \$526.30 \$506.89 \$431.57 \$526.63 \$500.87 \$498.04 \$456.76 46 \$546.80 \$448.38 \$568.19 \$547.23 \$520.47 \$517.53 \$474.63 \$465.92 47 \$590.47 \$568.69 \$540.88 \$537.82 \$493.24 48 \$484.19 \$562.11 \$558.93 \$512.60 \$503.19 49 \$613.64 \$591.01 50 \$637.71 \$614.19 \$584.15 \$580.85 \$532.70 \$522.93 51 \$662.66 \$638.22 \$607.01 \$603.58 \$553.54 \$543.39 52 \$688.51 \$663.12 \$630.69 \$627.12 \$575.13 \$564.58 53 \$715.25 \$688.87 \$655.18 \$651.47 \$597.47 \$586.51 54 \$743.32 \$715.91 \$680.90 \$677.05 \$620.92 \$609.53 55 \$772.29 \$743.81 \$707.43 \$703.43 \$645.12 \$633.28 56 \$802.59 \$772.99 \$735.19 \$731.03 \$670.43 \$658.13 57 \$833.79 \$803.04 \$763.76 \$759.44 \$696.49 \$683.71 \$793.56 \$789.08 \$723.66 58 \$866.32 \$834.37 \$710.39 59 \$900.19 \$866.99 \$824.59 \$819.92 \$751.96 \$738.16 60 \$935.39 \$900.90 \$856.83 \$851.99 \$781.36 \$767.03 \$971.94 \$936.09 \$890.31 \$885.27 \$811.89 \$797.00 61 \$885.27 62 \$971.94 \$936.09 \$890.31 \$811.89 \$797.00 \$885.27 63 \$971.94 \$936.09 \$890.31 \$811.89 \$797.00 \$971.94 \$890.31 \$885.27 \$811.89 64+ \$936.09 \$797.00

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective April 1, 2016 District of Columbia Small Group Exchange Appendix II-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	P DC Platinum 0/20/Dental/Ped Den P	P DC Platinum 500/20/Dental Ped Den	KP DC Gold @2@Dental/Ped Dental	DC Gold 500/20/Dental/Ped D	P DC Gold 1000/30/Dental/Ped D	en P DC Gold 1350/0%/HSA/Dental/Per	d Den KP DC Gold 1500/10/HSA/Dental/Ped Dental	P DC Silver 1250/35/Dental/Ped De	mP DC Silver 2000/35/Dental/Ped Den	P DC Silver 1500/30/HSA/Dental/Ped Den	KP DC Silver 2500/30/10%/HSA/Dental/Ped Dent	P DC Bronze 4500/50/Dental/Ped De	DC Bronze 6000/30/10%/HSA/Dental/Ped	De P DC Bronze 5000/20%/HSA/Dental/Ped I	es P DC Bronze 5000/20/HSA/Dental/Ped Der	CP DC Bronze 4500/50/POS/Dental/Ped Dent	KP DC Silver 2000/35/POS/Dental/Ped Dental	KP DC Gold 1000/30/POS/Dental/Ped Dental
20 and Under	\$279.95	\$269.63	\$256.44	\$254.99	\$233.85	\$229.57	\$219.11	\$211.82	\$199.13	\$199.06	\$184.91	\$164.31	\$151.71	\$154.48	\$154.03	\$185.55	\$224.45	\$271.19
21	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
22	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
23	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
24	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
25	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
26	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
27	\$311.20	\$299.72	\$285.07	\$283.45	\$259.95	\$255.18	\$243.56	\$235.47	\$221.35	\$221.27	\$205.56	\$182.66	\$168.65	\$171.72	\$171.23	\$206.27	\$249.50	\$301.46
28	\$318.48	\$306.73	\$291.73	\$290.08	\$266.04	\$261.15	\$249.26	\$240.97	\$226.52	\$226.45	\$210.36	\$186.92	\$172.59	\$175.74	\$175.23	\$211.09	\$255.33	\$308.51
29	\$325.33	\$313.33	\$298.01	\$296.32	\$271.75	\$266.77	\$254.62	\$246.16	\$231.39	\$231.32	\$214.89	\$190.95	\$176.30	\$179.51	\$179.00	\$215.63	\$260.83	\$315.14
30	\$333.46	\$321.17	\$305.45	\$303.73	\$278.55	\$273.44	\$260.98	\$252.31	\$237.18	\$237.10	\$220.26	\$195.72	\$180.71	\$184.00	\$183.48	\$221.02	\$267.35	\$323.02
31	\$342.02	\$329.41	\$313.30	\$311.52	\$285.70	\$280.46	\$267.68	\$258.79	\$243.27	\$243.18	\$225.91	\$200.74	\$185.35	\$188.73	\$188.19	\$226.69	\$274.22	\$331.31
32	\$349.73	\$336.83	\$320.36	\$318.54	\$292.14	\$286.78	\$273.71	\$264.62	\$248.75	\$248.67	\$231.01	\$205.27	\$189.52	\$192.97	\$192.43	\$231.80	\$280.39	\$338.78
33	\$357.86	\$344.67	\$327.80	\$325.96	\$298.94	\$293.45	\$280.09	\$270.78	\$254.54	\$254.45	\$236.37	\$210.04	\$193.93	\$197.46	\$196.91	\$237.19	\$286.91	\$346.65
34	\$366.42	\$352.91	\$335.65	\$333.75	\$306.09	\$300.47	\$286.78	\$277.25	\$260.62	\$260.54	\$242.03	\$215.06	\$198.57	\$202.19	\$201.62	\$242.87	\$293.77	\$354.94
35	\$374.98	\$361.16	\$343.49	\$341.55	\$313.24	\$307.49	\$293.48	\$283.73	\$266.71	\$266.62	\$247.69	\$220.08	\$203.21	\$206.91	\$206.33	\$248.54	\$300.64	\$363.24
36	\$383.55	\$369.40	\$351.33	\$349.35	\$320.39	\$314.51	\$300.19	\$290.21	\$272.80	\$272.71	\$253.34	\$225.12	\$207.84	\$211.63	\$211.04	\$254.22	\$307.50	\$371.53
37	\$392.11	\$377.65	\$359.18	\$357.14	\$327.54	\$321.53	\$306.88	\$296.69	\$278.90	\$278.79	\$259.00	\$230.14	\$212.48	\$216.36	\$215.75	\$259.89	\$314.37	\$379.82
38	\$396.81	\$382.17	\$363.49	\$361.43	\$331.47	\$325.39	\$310.56	\$300.25	\$282.24	\$282.14	\$262.10	\$232.90	\$215.03	\$218.95	\$218.34	\$263.01	\$318.14	\$384.38
39	\$401.52	\$386.71	\$367.80	\$365.72	\$335.41	\$329.25	\$314.26	\$303.81	\$285.59	\$285.49	\$265.22	\$235.67	\$217.58	\$221.56	\$220.93	\$266.14	\$321.91	\$388.95
40	\$417.36	\$401.96	\$382.31	\$380.15	\$348.64	\$342.24	\$326.65	\$315.79	\$296.86	\$296.76	\$275.68	\$244.97	\$226.17	\$230.29	\$229.65	\$276.63	\$334.61	\$404.29
41	\$433.62	\$417.64	\$397.21	\$394.96	\$362.22	\$355.58	\$339.38	\$328.10	\$308.43	\$308.32	\$286.42	\$254.51	\$234.98	\$239.27	\$238.59	\$287.41	\$347.65	\$420.05
42	\$450.75	\$434.13	\$412.90	\$410.56	\$376.53	\$369.62	\$352.78	\$341.05	\$320.60	\$320.49	\$297.74	\$264.56	\$244.26	\$248.72	\$248.01	\$298.76	\$361.38	\$436.63
43	\$468.30	\$451.03	\$428.97	\$426.54	\$391.18	\$384.01	\$366.52	\$354.34	\$333.09	\$332.98	\$309.32	\$274.86	\$253.77	\$258.40	\$257.67	\$310.39	\$375.46	\$453.63
44	\$486.71	\$468.75	\$445.83	\$443.32	\$406.56	\$399.11	\$380.92	\$368.27	\$346.18	\$346.06	\$321.48	\$285.66	\$263.75	\$268.56	\$267.80	\$322.60	\$390.21	\$471.47
45	\$505.55	\$486.90	\$463.08	\$460.46	\$422.30	\$414.55	\$395.66	\$382.52	\$359.57	\$359.45	\$333.92	\$296.72	\$273.95	\$278.96	\$278.16	\$335.07	\$405.31	\$489.71
46	\$525.23	\$505.86	\$481.12	\$478.40	\$438.75	\$430.70	\$411.07	\$397.41	\$373.58	\$373.45	\$346.93	\$308.28	\$284.62	\$289.82	\$288.99	\$348.12	\$421.10	\$508.78
47	\$545.78	\$525.65	\$499.94	\$497.11	\$455.90	\$447.54	\$427.16	\$412.96	\$388.20	\$388.06	\$360.50	\$320.34	\$295.76	\$301.15	\$300.30	\$361.75	\$437.57	\$528.68
48	\$567.18	\$546.26	\$519.54	\$516.61	\$473.79	\$465.09	\$443.91	\$429.15	\$403.42	\$403.28	\$374.64	\$332.90	\$307.36	\$312.97	\$312.08	\$375.93	\$454.73	\$549.42
49	\$589.44	\$567.70	\$539.94	\$536.88	\$492.38	\$483.35	\$461.33	\$446.00	\$419.25	\$419.11	\$389.35	\$345.96	\$319.42	\$325.25	\$324.32	\$390.69	\$472.57	\$570.98
50	\$612.56	\$589.96	\$561.11	\$557.94	\$511.69	\$502.30	\$479.42	\$463.49	\$435.69	\$435.54	\$404.61	\$359.53	\$331.95	\$338.00	\$337.04	\$406.01	\$491.11	\$593.37
51	\$636.53	\$613.05	\$583.07	\$579.78	\$531.71	\$521.96	\$498.18	\$481.63	\$452.75	\$452.58	\$420.44	\$373.60	\$344.94	\$351.23	\$350.23	\$421.89	\$510.33	\$616.59
52	\$661.35	\$636.96	\$605.81	\$602.39	\$552.46	\$542.32	\$517.61	\$500.41	\$470.41	\$470.24	\$436.84	\$388.17	\$358.39	\$364.93	\$363.89	\$438.35	\$530.24	\$640.65
53	\$687.04	\$661.71	\$629.34	\$625.78	\$573.91	\$563.38	\$537.71	\$519.85	\$488.67	\$488.50	\$453.80	\$403.24	\$372.31	\$379.10	\$378.03	\$455.38	\$550.82	\$665.53
54	\$714.01	\$687.68	\$654.04	\$650.35	\$596.43	\$585.50	\$558.82	\$540.25	\$507.86	\$507.67	\$471.62	\$419.07	\$386.93	\$393.99	\$392.87	\$473.25	\$572.45	\$691.65
55	\$741.83	\$714.47	\$679.53	\$675.68	\$619.68	\$608.31	\$580.59	\$561.30	\$527.64	\$527.46	\$490.00	\$435.41	\$402.00	\$409.34	\$408.18	\$491.69	\$594.76	\$718.60
56	\$770.94	\$742.50	\$706.19	\$702.20	\$643.99	\$632.17	\$603.38	\$583.33	\$548.34	\$548.16	\$509.23	\$452.48	\$417.78	\$425.39	\$424.19	\$510.98	\$618.09	\$746.80
57	\$800.90	\$771.37	\$733.64	\$729.49	\$669.02	\$656.75	\$626.83	\$606.00	\$569.66	\$569.46	\$529.02	\$470.07	\$434.02	\$441.93	\$440.67	\$530.84	\$642.12	\$775.83
58	\$832.16	\$801.47	\$762.26	\$757.96	\$695.12	\$682.37	\$651.29	\$629.64	\$591.88	\$591.68	\$549.66	\$488.42	\$450.95	\$459.17	\$457.87	\$551.56	\$667.17	\$806.10
59	\$864.68	\$832.79	\$792.07	\$787.59	\$722.30	\$709.05	\$676.75	\$654.26	\$615.03	\$614.82	\$571.14	\$507.51	\$468.58	\$477.12	\$475.77	\$573.12	\$693.25	\$837.60
60	\$898.50	\$865.37	\$823.04	\$818.39	\$750.55	\$736.78	\$703.22	\$679.85	\$639.07	\$638.86	\$593.48	\$527.36	\$486.91	\$495.78	\$494.38	\$595.53	\$720.37	\$870.36
61	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36
62	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36
63	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36
64+	\$933.60	\$899.16	\$855.19	\$850.35	\$779.85	\$765.54	\$730.68	\$706.40	\$664.04	\$663.81	\$616.67	\$547.96	\$505.93	\$515.16	\$513.68	\$618.80	\$748.50	\$904.36

Rates effective April 1, 2016 District of Columbia Small Group Exchange Appendix II-B

19 20 22 23 21 24 Gold Gold Gold Gold Platinum Platinum KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel P DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$293.95 \$283.11 \$269.26 \$267.74 \$245.55 \$241.04 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 21 22 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 23 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 \$272.95 24 \$326.76 \$314.71 \$299.32 \$297.62 \$267.95 25 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 26 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 27 \$326.76 \$314.71 \$299.32 \$297.62 \$272.95 \$267.95 \$334.40 \$322.07 \$306.32 \$274.22 28 \$304.58 \$279.34 \$341.59 \$328.99 \$312.90 \$285.34 29 \$311.14 \$280.11 \$292.48 30 \$350.13 \$337.22 \$320.73 \$318.92 \$287.12 \$359.12 \$345.88 \$328.96 \$327.11 31 \$299.98 \$294.49 32 \$367.22 \$353.67 \$336.37 \$334.47 \$306.74 \$301.11 33 \$375.75 \$361.89 \$344.19 \$342.24 \$313.88 \$308.12 34 \$384.75 \$370.56 \$352.43 \$350.43 \$321.39 \$315.50 35 \$393,73 \$379.21 \$360.66 \$358.62 \$328.90 \$322.86 36 \$402.72 \$387.87 \$368.90 \$366.81 \$336.41 \$330.23 37 \$411.71 \$396.53 \$377.13 \$375.00 \$343.92 \$337.61 38 \$416.66 \$401.29 \$381.66 \$379.50 \$348.04 \$341.66 39 \$421.60 \$406.05 \$386.19 \$384.01 \$352.18 \$345.71 40 \$438.23 \$422.06 \$401.43 \$399.16 \$366.07 \$359.35 \$455.31 \$438.51 \$417.07 \$373.36 41 \$414.71 \$380.33 42 \$473.29 \$455.83 \$433.54 \$431.09 \$395.35 \$388.10 43 \$491.72 \$473.58 \$450.42 \$447.87 \$410.75 \$403.21 44 \$511.04 \$492.19 \$468.13 \$465.47 \$426.89 \$419.06 \$530.82 \$443.41 45 \$511.24 \$486.24 \$483.49 \$435.28 \$551.50 \$531.15 \$505.17 \$502.32 \$460.68 46 \$452.23 \$573.07 \$551.93 \$524.94 \$521.98 \$478.71 47 \$469.92 \$595.54 \$573.57 \$545.53 \$542.44 \$497.48 \$488.35 48 \$618.91 \$596.09 \$566.94 \$563.73 \$517.00 49 \$507.51 50 \$643.19 \$619.47 \$589.17 \$585.84 \$537.28 \$527.42 51 \$668.35 \$643.70 \$612.22 \$608.76 \$558.29 \$548.06 52 \$694.42 \$668.82 \$636.11 \$632.51 \$580.07 \$569.43 53 \$721.39 \$694.79 \$660.81 \$657.07 \$602.60 \$591.55 54 \$749.70 \$722.06 \$686.75 \$682.87 \$626.25 \$614.77 55 \$778.92 \$750.20 \$713.51 \$709.47 \$650.66 \$638.72 56 \$809.48 \$779.63 \$741.51 \$737.31 \$676.19 \$663.78 57 \$840.95 \$809.94 \$770.32 \$765.96 \$702.47 \$689.58 \$841.54 \$800.38 \$873.76 \$795.86 \$729.88 \$716.49 58 59 \$907.92 \$874.44 \$831.67 \$826.96 \$758.42 \$744.50 \$943.42 60 \$908.64 \$864.19 \$859.31 \$788.07 \$773.62 \$980.28 \$944.13 \$897.96 \$892.86 \$818.85 \$803.85 61 62 \$980.28 \$944.13 \$897.96 \$892.86 \$818.85 \$803.85 63 \$980.28 \$944.13 \$897.96 \$892.86 \$818.85 \$803.85

\$897.96

\$892.86

\$818.85

\$803.85

\$980.28

64+

\$944.13

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective July 1, 2016 District of Columbia Small Group Exchange Appendix III-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age		CP DC Platinum 500/20/Dental/Ped Dent	KP DC Gold 0/20/Dental/Ped Dental	DC Gold 500/20/Dental/Ped De							KP DC Silver 2500/30/10%/HSA/Dental/Ped Dent							
20 and Under		\$271.94	\$258.65	\$257.18	\$235.86	\$231.54	\$220.99	\$213.64	\$200.84	\$200.77	\$186.50	\$165.72	\$153.02	\$155.80	\$155.35	\$187.14	\$226.38	\$273.52
21	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
22	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
23	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
24	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
25	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
26	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
27	\$313.87	\$302.30	\$287.52	\$285.89	\$262.19	\$257.38	\$245.66	\$237.49	\$223.25	\$223.18	\$207.33	\$184.22	\$170.09	\$173.20	\$172.70	\$208.04	\$251.65	\$304.05
28	\$321.22	\$309.37	\$294.24	\$292.57	\$268.32	\$263.40	\$251.40	\$243.04	\$228.46	\$228.39	\$212.17	\$188.53	\$174.07	\$177.25	\$176.74	\$212.90	\$257.53	\$311.16
29	\$328.13	\$316.02	\$300.57	\$298.87	\$274.09	\$269.06	\$256.81	\$248.27	\$233.38	\$233.31	\$216.74	\$192.59	\$177.82	\$181.05	\$180.54	\$217.48	\$263.07	\$317.85
30	\$336.32	\$323.92	\$308.08	\$306.34	\$280.95	\$275.79	\$263.22	\$254.48	\$239.22	\$239.14	\$222.15	\$197.40	\$182.26	\$185.58	\$185.06	\$222.92	\$269.64	\$325.80
31	\$344.96	\$332.23	\$315.99	\$314.20	\$288.16	\$282.87	\$269.98	\$261.02	\$245.36	\$245.27	\$227.85	\$202.46	\$186.94	\$190.35	\$189.81	\$228.64	\$276.57	\$334.16
32	\$352.73	\$339.72	\$323.11	\$321.28	\$294.65	\$289.25	\$276.06	\$266.90	\$250.89	\$250.80	\$232.99	\$207.03	\$191.15	\$194.63	\$194.08	\$233.80	\$282.80	\$341.69
33	\$360.93	\$347.63	\$330.62	\$328.76	\$301.50	\$295.97	\$282.49	\$273.10	\$256.72	\$256.63	\$238.40	\$211.84	\$195.60	\$199.16	\$198.60	\$239.23	\$289.38	\$349.63
34	\$369.57	\$355.94	\$338.53	\$336.62	\$308.72	\$303.05	\$289.25	\$279.63	\$262.86	\$262.78	\$244.11	\$216.91	\$200.28	\$203.93	\$203.35	\$244.95	\$296.30	\$357.99
35	\$378.20	\$364.26	\$346.44	\$344.48	\$315.93	\$310.13	\$296.00	\$286.16	\$269.00	\$268.91	\$249.82	\$221.97	\$204.96	\$208.69	\$208.10	\$250.67	\$303.22	\$366.36
36	\$386.84	\$372.57	\$354.35	\$352.35	\$323.14	\$317.21	\$302.77	\$292.70	\$275.15	\$275.06	\$255.51	\$227.05	\$209.63	\$213.45	\$212.85	\$256.40	\$310.14	\$374.73
37	\$395.48	\$380.89	\$362.26	\$360.21	\$330.35	\$324.29	\$309.52	\$299.24	\$281.29	\$281.19	\$261.22	\$232.12	\$214.30	\$218.22	\$217.60	\$262.13	\$317.07	\$383.09
38	\$400.22	\$385.46	\$366.61	\$364.53	\$334.32	\$328.19	\$313.23	\$302.83	\$284.67	\$284.57	\$264.35	\$234.90	\$216.88	\$220.84	\$220.21	\$265.27	\$320.87	\$387.69
39	\$404.97	\$390.04	\$370.96	\$368.87	\$338.29	\$332.08	\$316.96	\$306.42	\$288.05	\$287.94	\$267.50	\$237.69	\$219.45	\$223.46	\$222.83	\$268.42	\$324.68	\$392.29
40	\$420.95	\$405.42	\$385.59	\$383.41	\$351.63	\$345.18	\$329.46	\$318.50	\$299.41	\$299.31	\$278.05	\$247.07	\$228.11	\$232.27	\$231.62	\$279.00	\$337.48	\$407.77
41	\$437.35	\$421.22	\$400.62	\$398.36	\$365.34	\$358.63	\$342.30	\$330.92	\$311.08	\$310.96	\$288.88	\$256.69	\$237.00	\$241.32	\$240.64	\$289.88	\$350.64	\$423.66
42	\$454.62	\$437.86	\$416.44	\$414.08	\$379.76	\$372.79	\$355.81	\$343.98	\$323.35	\$323.24	\$300.29	\$266.84	\$246.36	\$250.85	\$250.14	\$301.33	\$364.48	\$440.38
43	\$472.32	\$454.91	\$432.66	\$430.21	\$394.54	\$387.31	\$369.67	\$357.38	\$335.95	\$335.84	\$311.98	\$277.22	\$255.95	\$260.62	\$259.89	\$313.06	\$378.68	\$457.53
44	\$490.89	\$472.78	\$449.66	\$447.12	\$410.05	\$402.54	\$384.20	\$371.43	\$349.15	\$349.03	\$324.24	\$288.12	\$266.01	\$270.86	\$270.10	\$325.37	\$393.57	\$475.52
45	\$509.89	\$491.08	\$467.06	\$464.42	\$425.92	\$418.11	\$399.06	\$385.80	\$362.66	\$362.54	\$336.79	\$299.27	\$276.31	\$281.35	\$280.55	\$337.95	\$408.79	\$493.92
46	\$529.74	\$510.20	\$485.25	\$482.51	\$442.52	\$434.40	\$414.60	\$400.83	\$376.79	\$376.66	\$349.91	\$310.92	\$287.07	\$292.31	\$291.47	\$351.12	\$424.71	\$513.15
4/	\$550.47 \$572.05	\$530.16 \$550.95	\$504.23	\$501.38	\$459.82	\$451.39	\$430.83 \$447.72	\$416.50	\$391.53	\$391.40 \$406.75	\$363.60	\$323.09 \$335.75	\$298.30	\$303.74	\$302.88	\$364.86 \$379.16	\$441.33	\$533.22 \$554.14
48			\$524.01	\$521.05	\$477.85	\$469.09		\$432.84	\$406.88		\$377.86		\$310.00	\$315.65	\$314.76 \$327.11		\$458.64	\$554.14 \$575.89
49	\$594.50 \$617.82	\$572.58 \$595.03	\$544.58 \$565.93	\$541.49 \$562.73	\$496.61 \$516.08	\$487.50 \$506.61	\$465.29 \$483.54	\$449.83 \$467.47	\$422.85 \$439.43	\$422.71 \$439.28	\$392.69 \$408.08	\$348.93 \$362.62	\$322.16 \$334.80	\$328.04 \$340.90	\$327.11 \$339.94	\$394.04 \$409.50	\$476.63 \$495.33	\$575.89 \$598.47
	0011102	00,000	40.000		40.000	40.0000	4 100-0 1		0.103110	Q-103.000	Q 100000	0.0000	400.100	40.100.0	400000	4100100		
51	\$642.00 \$667.03	\$618.32	\$588.07 \$611.01	\$584.76 \$607.56	\$536.28 \$557.20	\$526.44 \$546.98	\$502.46 \$522.05	\$485.77 \$504.71	\$456.63 \$474.45	\$456.47	\$424.05 \$440.59	\$376.81 \$391.50	\$347.90 \$361.47	\$354.25 \$368.06	\$353.24 \$367.01	\$425.52	\$514.71 \$534.79	\$621.89 \$646.15
52	\$667.03 \$692.94	\$642.44 \$667.39	\$611.01 \$634.75	\$607.56	400.100	40.000	\$522.05 \$542.33	\$504.71 \$524.31		\$474.28 \$492.70	\$440.59 \$457.70	000.000		\$368.06 \$382.35	\$367.01 \$381.28	\$442.12 \$459.29	\$534.79 \$555.55	\$646.15 \$671.24
5.5	\$692.94 \$720.14	\$667.39 \$693.58	\$634.75 \$659.66	\$631.15 \$655.94	\$578.84 \$601.55	\$568.22 \$590.53	\$542.33 \$563.62	\$524.31 \$544.89	\$492.87 \$512.22	\$492.70 \$512.03	\$457.70 \$475.67	\$406.71 \$422.67	\$375.51 \$390.25	\$382.35 \$397.37	\$381.28 \$396.24	\$459.29 \$477.32	\$555.55 \$577.36	\$671.24 \$697.59
54	\$720.14 \$748.20	\$693.58 \$720.61	\$659.66 \$685.36	\$655.94 \$681.49	0.00100	\$590.53 \$613.54	\$563.62 \$585.58	\$544.89 \$566.12		\$512.03 \$531.99	4.1.0.0.			\$397.37	\$396.24 \$411.68	\$477.32	\$5//.36 \$599.86	\$697.59 \$724.77
55	\$748.20 \$777.56	\$720.61 \$748.88			\$625.00 \$649.53	\$613.54 \$637.60	\$585.58 \$608.56	\$566.12 \$588.34	\$532.18 \$553.05		\$494.21	\$439.15 \$456.37	\$405.46 \$421.37		\$411.68 \$427.84	\$495.91 \$515.37	4000000	
56	0111100	0.7.10100	\$712.26	\$708.23	4013100	4001100	400000			\$552.87	\$513.60	0.0000	0.000	\$429.05		40.40.0	\$623.40	\$753.21
57	\$807.78	\$778.00 \$808.35	\$739.94 \$768.81	\$735.76	\$674.76	\$662.39 \$688.23	\$632.21 \$656.88	\$611.21 \$635.05	\$574.55 \$596.96	\$574.35	\$533.56	\$474.11	\$437.74	\$445.73	\$444.46	\$535.40 \$556.30	\$647.63	\$782.49 \$813.02
58	\$839.31 \$872.11	0.000000	\$768.81 \$798.87	\$764.47 \$794.35	\$701.09		\$656.88 \$682.57	0.00-0.100	40.0000	\$596.76	\$554.38 \$576.05	\$492.62	\$454.82	\$463.11 \$481.22	\$461.80 \$479.86	400000	\$672.90	\$813.02 \$844.80
59	\$872.11 \$906.22	\$839.95 \$872.80	\$798.87 \$830.11		\$728.51 \$757.00	\$715.14	\$682.57 \$709.26	\$659.88 \$685.60	\$620.31 \$644.56	\$620.10 \$644.35	\$576.05 \$598.58	\$511.87 \$531.89	\$472.61 \$491.09	\$481.22 \$500.04	\$479.86	\$578.04 \$600.65	\$699.21 \$726.55	\$844.80 \$877.84
0.0	0.00000	0.01.000		\$825.42	4.0	\$743.11	4100100	3003.07	3044.50	401100	40,000	000000	0.0.000	40.000.	3470.03	3000.00		
61	\$941.61	\$906.89 \$906.89	\$862.54	\$857.67 \$857.67	\$786.56 \$786.56	\$772.13	\$736.97	\$712.46	\$669.74 \$669.74	\$669.52	\$621.97	\$552.66	\$510.27	\$519.58	\$518.10	\$624.12	\$754.93	\$912.13 \$912.13
62	\$941.61	0,700103	\$862.54 \$862.54	\$857.67	4.0000	\$772.13	\$736.97 \$736.97	\$712.46 \$712.46		\$669.52	\$621.97 \$621.97	\$552.66	\$510.27	\$519.58	\$518.10 \$518.10	\$624.12 \$624.12	\$754.93	\$912.13
63	\$941.61 \$941.61	\$906.89 \$906.89	\$862.54 \$862.54	\$857.67 \$857.67	\$786.56 \$786.56	\$772.13 \$772.13	\$736.97 \$736.97	\$712.46 \$712.46	\$669.74 \$669.74	\$669.52 \$669.52	\$621.97 \$621.97	\$552.66 \$552.66	\$510.27 \$510.27	\$519.58 \$519.58	\$518.10 \$518.10	\$624.12 \$624.12	\$754.93 \$754.93	\$912.13 \$912.13
64+	3941.61	3500.89	3862.54	\$857.67	378b.5b	\$1/2.13	\$136.91	3/12.46	5009.74	\$009.52	\$021.97	3252.66	\$510.27	\$319.58	\$318.10	\$024.12	\$754.93	\$912.13

Rates effective July 1, 2016 District of Columbia Small Group Exchange Appendix III-B

19 20 22 23 21 24 Gold Gold Gold Platinum Gold Platinum KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel P DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$296.48 \$285.54 \$271.58 \$270.04 \$247.66 \$243.11 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 21 22 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 23 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 \$300.18 \$275.30 24 \$329.57 \$317.41 \$301.89 \$270.25 25 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 26 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 27 \$329.57 \$317.41 \$301.89 \$300.18 \$275.30 \$270.25 \$337.27 \$308.95 \$307.20 28 \$324.84 \$281.74 \$276.57 \$344.52 \$331.82 \$315.59 \$287.79 29 \$313.81 \$282.51 30 \$353.14 \$340.12 \$323.49 \$321.66 \$294.99 \$289.58 \$362.20 \$348.85 \$329.92 \$302.56 31 \$331.79 \$297.02 32 \$370.37 \$356.71 \$339.26 \$337.34 \$309.38 \$303.70 33 \$378.98 \$365.00 \$347.15 \$345.18 \$316.58 \$310.77 34 \$388.05 \$373.74 \$355.46 \$353,44 \$324.15 \$318.21 \$382.47 \$325.63 35 \$397.12 \$363.76 \$361.70 \$331.73 36 \$406.18 \$391.21 \$372.07 \$369.96 \$339.29 \$333.07 37 \$415.24 \$399,93 \$380.37 \$378.22 \$346.87 \$340.51 38 \$420.24 \$404.73 \$384.94 \$382.76 \$351.03 \$344.59 39 \$425.22 \$409.54 \$389.51 \$387.31 \$355.20 \$348.68 40 \$442.00 \$425.69 \$404.88 \$402.59 \$369.21 \$362,44 \$459.22 \$442.28 \$420.65 \$383.60 41 \$418.27 \$376.57 42 \$477.36 \$459.75 \$437.27 \$434.79 \$398.74 \$391.43 43 \$495.94 \$477.65 \$454.28 \$451.72 \$414.28 \$406.68 44 \$515.43 \$496.42 \$472.15 \$469.47 \$430.55 \$422.66 \$535.38 \$447.22 45 \$515.64 \$490.42 \$487.64 \$439.02 \$535.72 \$509.51 \$506.63 \$464.64 46 \$556.23 \$456.12 \$577.99 \$556.67 \$529.45 \$526.46 \$482.82 47 \$473.96 \$578.50 \$550.21 \$547.10 \$501.75 48 \$600.66 \$492.54 \$624.23 \$571.81 \$568.57 49 \$601.21 \$521.44 \$511.87 50 \$648.71 \$594.23 \$590.87 \$541.89 \$531.95 \$624.79 51 \$674.09 \$649.23 \$617.48 \$613.99 \$563.09 \$552,77 52 \$700.39 \$674.56 \$641.57 \$637.94 \$585.05 \$574.32 53 \$727.59 \$700.76 \$666.48 \$662.71 \$607.78 \$596.63 54 \$756.14 \$728.26 \$692.65 \$688.73 \$631.63 \$620.05 55 \$785.61 \$756.64 \$719.64 \$715.57 \$656.25 \$644.21 56 \$816.44 \$786.33 \$747.87 \$743.64 \$682.00 \$669.48 57 \$848.18 \$816.90 \$776.94 \$772.54 \$708.51 \$695.51 \$848.77 \$807.25 \$881.27 \$802.69 \$736.15 \$722.65 58 59 \$915.72 \$881.95 \$838.82 \$834.07 \$764.93 \$750.90 60 \$951.53 \$916.44 \$871.61 \$866.69 \$794.84 \$780.26 \$988.71 \$952.23 \$905.67 \$900.54 \$825.90 \$810.75 61 \$952.23 62 \$988.71 \$905.67 \$900.54 \$825.90 \$810.75 63 \$988.71 \$952.23 \$905.67 \$900.54 \$825.90 \$810.75

\$905.67

\$900.54

\$825.90

\$810.75

\$988.71

64+

\$952.23

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. Rates effective October 1, 2016 District of Columbia Small Group Exchange Appendix IV-A

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Γ	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold
Age	DC Platinum 0/20/Dental/Ped D	Den P DC Platinum 500/20/Dental/Ped Den	KP DC Gold 0/20/Dental/Ped Dental	DC Gold 500/20/Dental/Ped D	P DC Gold 1000/30/Dental/Ped Den	P DC Gold 1350/0%/HSA/Dental/Ped D	ten KP DC Gold 1500/10/HSA/Dental/Ped Dental P	DC Silver 1250/35/Dental/Ped I	en P DC Silver 2000/35/Dental/Ped E	en P DC Säver 1500/30/HSA/Dental/Ped Den	KP DC Silver 2500/30/10%/HSA/Dental/Ped Denta	P DC Bronze 4500/50/Dental/Ped	Den DC Bronze 6000/30/10%/HSA/Dental/Ped De	DC Bronze 5000/20%/HSA/Dental/Ped Do	P DC Bronze 5000/20/HSA/Dental/Ped Dent	KP DC Bronze 4500/50/POS/Dental/Ped Dental	KP DC Silver 2000/35/POS/Dental/Ped Dental	KP DC Gold 1000/30/POS/Dental/Ped Dental
20 and Under	\$284.78	\$274.28	\$260.87	\$259.39	\$237.89	\$233.53	\$222.89	\$215.48	\$202.56	\$202.49	\$188.11	\$167.14	\$154.33	\$157.14	\$156.69	\$188.75	\$228.32	\$275.87
21	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
22	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
23	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
24	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
25	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
26	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
27	\$316.57	\$304.89	\$289.99	\$288.34	\$264.44	\$259.59	\$247.77	\$239.53	\$225.16	\$225.09	\$209.11	\$185.81	\$171.56	\$174.69	\$174.18	\$209.83	\$253.81	\$306.66
28	\$323.98	\$312.02	\$296.77	\$295.09	\$270.63	\$265.66	\$253.56	\$245.13	\$230.43	\$230.36	\$213.99	\$190.15	\$175.57	\$178.77	\$178.26	\$214.73	\$259.74	\$313.83
29	\$330.94	\$318.73	\$303.15	\$301.44	\$276.44	\$271.37	\$259.01	\$250.40	\$235.38	\$235.31	\$218.60	\$194.24	\$179.34	\$182.61	\$182.09	\$219.35	\$265.33	\$320.58
30	\$339.21	\$326.71	\$310.72	\$308.97	\$283.36	\$278.16	\$265.49	\$256.66	\$241.27	\$241.19	\$224.06	\$199.09	\$183.83	\$187.17	\$186.65	\$224.84	\$271.96	\$328.59
31	\$347.92	\$335.09	\$318.70	\$316.90	\$290.63	\$285.30	\$272.30	\$263.26	\$247.47	\$247.38	\$229.81	\$204.20	\$188.55	\$191.98	\$191.44	\$230.60	\$278.95	\$337.03
32	\$355.76	\$342.64	\$325.89	\$324.04	\$297.18	\$291.73	\$278.43	\$269.19	\$253.04	\$252.96	\$234.99	\$208.81	\$192.79	\$196.30	\$195.75	\$235.80	\$285.23	\$344.62
33	\$364.03	\$350.61	\$333.46	\$331.58	\$304.09	\$298.51	\$284.92	\$275.45	\$258.93	\$258.84	\$240.45	\$213.66	\$197.28	\$200.87	\$200.30	\$241.28	\$291.86	\$352.63
34	\$372.74	\$358.99	\$341.44	\$339.51	\$311.37	\$305.65	\$291.73	\$282.03	\$265.12	\$265.03	\$246.21	\$218.77	\$202.00	\$205.68	\$205.10	\$247.06	\$298.84	\$361.07
35	\$381.45	\$367.39	\$349.41	\$347.44	\$318.64	\$312.79	\$298.54	\$288.62	\$271.31	\$271.22	\$251.96	\$223.88	\$206.72	\$210.48	\$209.89	\$252.82	\$305.83	\$369.51
36	\$390.16	\$375.77	\$357.39	\$355.37	\$325.92	\$319.93	\$305.37	\$295.22	\$277.51	\$277.42	\$257.71	\$229.00	\$211.43	\$215.28	\$214.68	\$258.60	\$312.80	\$377.94
37	\$398.87	\$384.16	\$365.38	\$363.30	\$333.19	\$327.08	\$312.18	\$301.81	\$283.71	\$283.60	\$263.46	\$234.11	\$216.15	\$220.10	\$219.47	\$264.38	\$319.79	\$386.38
38	\$403.66	\$388.77	\$369.76	\$367.66	\$337.19	\$331.01	\$315.92	\$305.43	\$287.11	\$287.01	\$266.62	\$236.92	\$218.74	\$222.73	\$222.11	\$267.55	\$323.63	\$391.02
39	\$408.45	\$393.39	\$374.15	\$372.03	\$341.19	\$334.93	\$319.68	\$309.05	\$290.52	\$290.42	\$269.79	\$239.73	\$221.34	\$225.38	\$224.74	\$270.73	\$327.47	\$395.66
40	\$424.57	\$408.90	\$388.90	\$386.71	\$354.65	\$348.15	\$332.29	\$321.24	\$301.98	\$301.88	\$280.43	\$249.19	\$230.07	\$234.26	\$233.61	\$281.40	\$340.38	\$411.27
41	\$441.10	\$424.84	\$404.07	\$401.78	\$368.47	\$361.71	\$345.24	\$333.77	\$313.75	\$313.64	\$291.36	\$258.90	\$239.04	\$243.40	\$242.71	\$292.37	\$353.65	\$427.29
42	\$458.53	\$441.62	\$420.02	\$417.64	\$383.02	\$375.99	\$358.87	\$346.94	\$326.13	\$326.02	\$302.87	\$269.13	\$248.47	\$253.01	\$252.29	\$303.92	\$367.61	\$444.16
43	\$476.38	\$458.81	\$436.37	\$433.90	\$397.93	\$390.64	\$372.85	\$360.45	\$338.83	\$338.72	\$314.66	\$279.60	\$258.15	\$262.86	\$262.12	\$315.75	\$381.94	\$461.46
44	\$495.10	\$476.84	\$453.52	\$450.96	\$413.58	\$405.99	\$387.50	\$374.62	\$352.15	\$352.03	\$327.02	\$290.59	\$268.30	\$273.19	\$272.42	\$328.16	\$396.95	\$479.60
45	\$514.27	\$495.30	\$471.07	\$468.41	\$429.58	\$421.70	\$402.49	\$389.12	\$365.78	\$365.65	\$339.69	\$301.84	\$278.68	\$283.77	\$282.96	\$340.85	\$412.30	\$498.16
46	\$534.30	\$514.59	\$489.42	\$486.66	\$446.32	\$438.13	\$418.16	\$404.27	\$380.03	\$379.89	\$352.92	\$313.59	\$289.53	\$294.82	\$293.98	\$354.13	\$428.36	\$517.56
47	\$555.19	\$534.72	\$508.56	\$505.69	\$463.77	\$455.26	\$434.53	\$420.08	\$394.89	\$394.76	\$366.72	\$325.87	\$300.86	\$306.35	\$305.48	\$367.99	\$445.12	\$537.80
48	\$576.97	\$555.69	\$528.51	\$525.52	\$481.96	\$473.12	\$451.57	\$436.56	\$410.38	\$410.24	\$381.10	\$338.64	\$312.66	\$318.37	\$317.46	\$382.42	\$462.58	\$558.90
49	\$599.61	\$577.50	\$549.25	\$546.15	\$500.88	\$491.69	\$469.29	\$453.69	\$426.48	\$426.34	\$396.06	\$351.93	\$324.93	\$330.86	\$329.92	\$397.43	\$480.73	\$580.83
50	\$623.13	\$600.14	\$570.79	\$567.57	\$520.52	\$510.96	\$487.69	\$471.48	\$443.21	\$443.05	\$411.59	\$365.74	\$337.67	\$343.83	\$342.86	\$413.01	\$499.59	\$603.61
51	\$647.51	\$623.63	\$593.13	\$589.78	\$540.88	\$530.96	\$506.78	\$489.94	\$460.56	\$460.39	\$427.69	\$380.05	\$350.89	\$357.29	\$356.28	\$429.17	\$519.13	\$627.23
52	\$672.76	\$647.95	\$616.26	\$612.78	\$561.99	\$551.68	\$526.54	\$509.05	\$478.52	\$478.36	\$444.38	\$394.86	\$364.58	\$371.22	\$370.17	\$445.92	\$539.38	\$651.70
53	\$698.89	\$673.12	\$640.20	\$636.58	\$583.81	\$573.10	\$546.99	\$528.82	\$497.10	\$496.93	\$461.63	\$410.20	\$378.73	\$385.64	\$384.55	\$463.24	\$560.32	\$677.01
54	\$726.33	\$699.54	\$665.32	\$661.57	\$606.72	\$595.60	\$568.46	\$549.57	\$516.62	\$516.43	\$479.75	\$426.30	\$393.60	\$400.78	\$399.64	\$481.42	\$582.32	\$703.58
55	\$754.63	\$726.80	\$691.25	\$687.34	\$630.37	\$618.81	\$590.61	\$570.98	\$536.75	\$536.56	\$498.46	\$442.92	\$408.94	\$416.40	\$415.22	\$500.17	\$605.02	\$731.00
56	\$784.24	\$755.31	\$718.38	\$714.32	\$655.11	\$643.08	\$613.79	\$593.39	\$557.80	\$557.62	\$518.01	\$460.29	\$424.99	\$432.73	\$431.51	\$519.80	\$628.76	\$759.68
57	\$814.72	\$784.68	\$746.30	\$742.08	\$680.56	\$668.08	\$637.64	\$616.46	\$579.49	\$579.28	\$538.14	\$478.18	\$441.50	\$449.56	\$448.28	\$540.00	\$653.20	\$789.21
58	\$846.51	\$815.29	\$775.41	\$771.03	\$707.11	\$694.14	\$662.52	\$640.51	\$602.09	\$601.89	\$559.14	\$496.85	\$458.73	\$467.09	\$465.77	\$561.07	\$678.68	\$820.00
59	\$879.60	\$847.16	\$805.73	\$801.18	\$734.76	\$721.28	\$688.43	\$665.55	\$625.64	\$625.42	\$581.00	\$516.27	\$476.67	\$485.36	\$483.98	\$583.01	\$705.22	\$852.05
60	\$914.00	\$880.30	\$837.24	\$832.51	\$763.50	\$749.50	\$715.35	\$691.58	\$650.10	\$649.88	\$603.72	\$536.46	\$495.31	\$504.34	\$502.91	\$605.81	\$732.79	\$885.38
61	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97
62	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97
63	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97
64+	\$949.71	\$914.67	\$869.95	\$865.02	\$793.32	\$778.76	\$743.30	\$718.58	\$675.48	\$675.27	\$627.31	\$557.41	\$514.66	\$524.05	\$522.54	\$629.48	\$761.42	\$919.97

Rates effective October 1, 2016 District of Columbia Small Group Exchange Appendix IV-B

19 20 22 23 21 24 Gold Gold Platinum Gold Gold Platinum KP DC Platinum 0/20/Dental/Ped Dental/Sel KP DC Platinum 500/20/Dental/Ped Dental/Sel KP DC Gold 0/20/Dental/Ped Dental/Sel KP DC Gold 500/20/Dental/Ped Dental/Sel KP DC Gold 1000/30/Dental/Ped Dental/Sel P DC Gold 1350/0%/HSA/Dental/Ped Dental/Sel 20 and Under \$299.03 \$288.00 \$273.91 \$272.36 \$249.79 \$245.20 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 21 22 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 23 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 \$332.40 24 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 25 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 26 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 27 \$332.40 \$320.14 \$304.48 \$302.76 \$277.66 \$272.58 \$327.63 28 \$340.17 \$311.60 \$309.84 \$284.16 \$278.95 \$347.48 \$334.67 \$318.30 \$316.51 \$290.26 29 \$284.94 30 \$356.17 \$343.04 \$326.27 \$324.42 \$297.53 \$292.07 \$365.31 \$334.64 \$332.75 31 \$351.84 \$305.16 \$299.57 32 \$373.55 \$359.77 \$342.18 \$340.24 \$312.03 \$306.31 33 \$382.23 \$368.14 \$350.13 \$348.15 \$319.30 \$313.44 34 \$391.38 \$376.95 \$358.51 \$356.48 \$326.93 \$320.94 \$385.75 35 \$400.53 \$366.88 \$364.81 \$334.58 \$328.43 36 \$409.67 \$394.57 \$375.27 \$373.14 \$342.21 \$335.93 37 \$418.81 \$403.37 \$383.64 \$381.47 \$349.85 \$343.43 38 \$423.85 \$408.21 \$388.25 \$386.05 \$354.05 \$347.55 39 \$428.87 \$413.05 \$392.85 \$390.64 \$358.26 \$351.68 40 \$445.79 \$429.35 \$408.35 \$406.05 \$372.38 \$365.55 \$424.27 41 \$463.16 \$446.08 \$421.87 \$386.89 \$379.80 42 \$481.46 \$463.70 \$441.02 \$438.53 \$402.17 \$394.79 43 \$500.20 \$481.75 \$458.19 \$455.60 \$417.83 \$410.17 44 \$519.86 \$500.68 \$476.20 \$473.51 \$434.25 \$426.29 \$539.98 45 \$520.06 \$494.63 \$491.83 \$451.06 \$442.79 \$540.32 \$513.89 \$510.98 \$468.63 46 \$561.01 \$460.03 \$582.96 \$561.45 \$534.00 \$530.98 \$486.97 47 \$478.03 \$605.82 \$583.47 \$554.94 48 \$551.80 \$506.06 \$496.77 \$606.37 \$576.72 \$573,46 \$525.92 49 \$629.59 \$516.27 50 \$654.28 \$630.15 \$599.33 \$595.95 \$546.55 \$536.52 51 \$679.88 \$654.81 \$622.79 \$619.27 \$567.93 \$557.51 52 \$706.41 \$680.36 \$647.08 \$643,42 \$590.08 \$579.25 53 \$733.84 \$706.77 \$672.21 \$668.40 \$613.00 \$601.75 54 \$762.64 \$734.52 \$698.60 \$694.65 \$637.06 \$625.37 55 \$792.36 \$763.14 \$725.82 \$721.71 \$661.89 \$649.74 56 \$823.45 \$793.08 \$754.30 \$750.03 \$687.86 \$675.24 57 \$855.46 \$823.91 \$783.61 \$779.18 \$714.59 \$701.48 \$742.47 \$888.84 \$856.06 \$814.19 \$809.59 \$728.85 58 59 \$923.59 \$889.52 \$846.02 \$841.23 \$771.50 \$757.35 60 \$959.70 \$924.32 \$879.10 \$874.13 \$801.67 \$786.97 \$997.20 \$960.42 \$913.44 \$908.28 \$832.98 \$817.71 61 62 \$997.20 \$960.42 \$913.44 \$908.28 \$832.98 \$817.71 63 \$997.20 \$960.42 \$913.44 \$908.28 \$832.98 \$817.71

\$913.44

\$832.98

\$817.71

\$908.28

\$997.20

64+

\$960.42



Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. 2101 East Jefferson Street Rockville, Maryland 20852

May 1, 2015

Mr. Efren Tanhehco Supervisory Actuary Department of Insurance and Securities Insurance Product Division 810 First Street, N.E. Washington, DC 20002

Re: NAIC #: 95639

HIOS Issuer ID 94506

Small Group On-Exchange Rate Filing

Filing #2

Dear Mr. Tanhehco,

Attached is the small group on-exchange rate filing for Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. (Kaiser) for a premium rate change effective January 1, 2016. Kaiser is an HMO company and offers traditional HMO copayment plans covering medical and pharmacy claims expenses. Kaiser also offers Deductible and High Deductible plans, some of which are HSA qualified.

The overall impact to the index rate is -4.9%.

Sincerely,

Stephen Chuang Actuarial Analyst Kaiser Foundation Health Plan, Inc.

Phone: 301-816-5854 Fax: 301-816-7124

Email: stephen.chuang@kp.org

Rate Filing Justification Part II (Plain Language Summary)

Pursuant to 45 CFR 154.215, health insurance issuers are required to file Rate Filing Justifications. Part II of the Rate Filing Justification for rate increases and new submissions must contain a written description that includes a simple and brief narrative describing the data and assumptions that were used to develop the proposed rates. The Part II template below must be filled out and uploaded as an Adobe PDF or Microsoft Word file.

Name of Company
SERFF tracking number
Submission Date
Product Name
Market Type (Individual/Small Group)
Rate Filing Type (Rate Increase / New Filing)
Scope and Range of the Increase: The
This filing will impact: # of D.C. policyholders # of D.C. covered lives
 Average Rate Change: The average premium change, by percentage, across all policy holders if the filing is approved
Individuals within the group may vary from the aggregate of the above increase components as a result
of:
Financial Experience of Product
The overall financial experience of the product includes:

The rate increase will affect the projected financial experience of the product by:
Components of Increase The request is made up of the following components:
Trend Increases –% of the% total filed increase
 Medical Utilization Changes –Defined as the increase in total plan claim costs not attributable to changes in the unit cost of underlying services, or renegotiation of provider contracts. Examples include changes in the mix of services utilized, or an increase/decrease in the frequency of service utilization.
This component is% of the% total filed increase.
 Medical Price Changes – Defined as the increase in total plan claim costs attributable to changes in the unit cost of underlying services, or renegotiation of provider contracts.
This component is% of the% total filed increase.
Other Increases –% of the% total filed increase
 Medical Benefit Changes Required by Law – Defined as any new mandated plan benefit changes, as mandated by either State or Federal Regulation.
This component is% of the% total filed increase.
2. Medical Benefit Changes Not Required by Law – Defined as changes in plan benefit design made by the company, which are not required by either State or Federal Regulation.
This component is% of the% total filed increase.
3. Changes to Administration Costs – Defined as increases in the costs of providing insurance coverage. Examples include claims payment expenses, distribution costs, taxes, and general business expenses such as rent, salaries, and overhead.
This component is% of the% total filed increase.
 Changes to Profit Margin – Defined as increases to company surplus or changes as an additional margin to cov the risk of the company.
This component is% of the% total filed increase.
5. Other – Defined as:
This component is% of the% total filed increase.

Please provide Company specific inputs for any cells shaded in blue that currently has dummy variables.

Purpose, Scope, and Reason for Rate Increase

Insurance Company Name HIOS ID SERFF Filing Number Date of Submission Proposed Effective Date

Average annual premium per policy

Proposed Overall Rate Change Proposed Minimum Rate Change Proposed Maximum Rate Change

Before Rate Increase	After Rate Increase
\$7,841	\$8,014
-4.90%	

Relationship of Proposed Rate Scale to Current Rate Scale Due to:

Rate Scale Due to:	Description	Relativity
Claims Experience	XXX	0.9620
Age / Gender	xxx	0.9965
Tier	XXX	1.0000
Geography	XXX	1.0000
Tobacco	XXX	1.0000
Benefit Plan Relativities	XXX	1.0000
Mandated Benefit Changes	XXX	1.0000
Non-Mandated Benefit Changes	XXX	1.0000
Other	XXX	0.9920
	Total Average Relativity of Proposed vs. Current Scale	0.9510

Annual Rate Change Distribution

	Impacted # of Contracts	Impacted # of Members	Impacted # of Groups
Reduction of 15.00% or more	0	0	0
Reduction of 10.01% to 14.99%	0	0	0
Reduction of 5.01% to 10.00%	16	27	0
Reduction of 0.01% to 5.00%	53	91	0
No Change	0	0	0
Increase of 0.01% to 5.00%	1,576	2,715	0
Increase of 5.01% to 10.00%	13	23	0
Increase of 10.01% to 14.99%	0	0	0
Increase of 15.00% or more	0	0	0
Total	1,658	2,856	0

History of Rate Changes

Average Annual Approved Rate

2013 NA NA	
2010	
2014 NA NA	
2015 NA NA	

Experience Period Used in Rate Development

General Description of Experience Used in Rate Development (may be different than experience shown in URRT)

accumulating District of Columbia-specific medical and administrative expenses for essential health benefits (EHB) for non-grandfathered business in the Child-Only,

Does experience include pools/blocks of business not affected by propoed rate change?

No (Yes or No)

	Incurred From Month/Year	Incurred To Month/Year
Time period used for Experience Data in Rate Development	1/1/2014	12/31/2014

Total Written Premium in Experience Period Total Earned Premium in Experience Period Total Incurred Claims in Experience Period Loss Ratio 103.90%

Paid Through Date For Claims	12/31/2014
IBNR as % of Incurred Claims	7.57%
IBNR as # of Months of Paid Claims	0.91

Number of Contracts/Policyholders	1,658	1
Number of Contracts/Policyfloiders Number of Covered Lives	•	
Number of Covered Lives	2,000	
Service Category	Incurred Claims \$ PMPM	% Incurred
Inpatient Facility	\$58.62	18.2%
Outpatient Facility	\$44.80	13.9%
Professional	\$156.60	48.6%
Prescription Drugs	\$56.01	17.4%
Capitation and Other Provider Payments	\$1.16	0.4%
Other	\$4.74	1.5%
Total	\$321.92	,
		_
Credibility Analysis		
Assumed Experience Credibility %	100.00%	
Description of Credibility Formula and the Theoretical Basis for Use	NA	
Alternative Data Sources		
Description of Any Alternative Experience Data Used in Rate Development	NA	
Description of Any Manual Rate Data Used in Rate Development	NA	

Retention

	PMPM in effect during the experience period	PMPM from Most Recent Approved Rate Filing	Proposed PMPM for Effective Date
Payroll and Benefits	\$21.93	\$21.93	\$24.92
Outsourced Services (EDP, claims, etc.)	\$2.83	\$2.83	\$3.22
Auditing and consulting	\$0.62	\$0.62	\$0.70
Marketing & Advertising	\$1.55	\$1.55	\$1.76
Legal Expenses	\$0.00	\$0.00	\$0.00
Other General Admin Expense	\$14.47	\$14.47	\$16.45
Commissions & Brokers Fees	\$22.48	\$22.48	\$25.54
Taxes, Licenses & Fees	\$11.37	\$11.37	\$11.53
Reinsurance	\$0.00	\$0.00	\$0.00
Profit/Risk Margin	\$3.96	\$3.96	\$6.01

	As % of Premium during the experience period	As % of Premium from Most Recent Approved Rate Filing	Proposed As % of Premium for Effective Date
Payroll and Benefits	5.85%	5.85%	6.23%
Outsourced Services (EDP, claims, etc.)	0.76%	0.76%	0.80%
Auditing and consulting	0.17%	0.17%	0.18%
Marketing & Advertising	0.41%	0.41%	0.44%
Legal Expenses	0.00%	0.00%	0.00%
Other General Admin Expense	3.86%	3.86%	4.11%
Commissions & Brokers Fees	6.00%	6.00%	6.38%
Taxes, Licenses & Fees	2.87%	2.87%	2.88%
Reinsurance	0.00%	0.00%	0.00%
Profit/Risk Margin	1.00%	1.00%	1.50%

Trend &	Projection	Assumptions

			<u>Adjust</u>
		Litil Adiustms	nto to Current Boto
<u> </u>	Util. Adjustments to Current Rate Util/1000 Benefit Plan Populatio		Population
Camina Catamani			
Service Category	Trend	Change	Change
Inpatient Facility	1.0050	1.0030	0.9921
Outpatient Facility	1.0250	1.0029	0.9921
Professional	1.0150	1.0005	0.9921
Prescription Drugs	1.0200	1.0015	0.9921
Capitation and Other Provider Payments	1.0000	1.0000	1.0000
Other	1.0150	1.0043	0.9921

		Util. Adjustment	s to Current Rate
	Util/1000	Benefit Plan	Population
Service Category	Trend	Change	Change
Inpatient Facility	1.0050	1.0030	0.9921
Outpatient Facility	1.0250	1.0029	0.9921
Professional	1.0150	1.0005	0.9921
Prescription Drugs	1.0200	1.0015	0.9921
Capitation and Other Provider Payments	1.0000	1.0000	1.0000

Other	1.0150	1.0043	0.9921
Service Category	Incurred Claims \$ PMPM	Medical Trend	
Inpatient Facility	\$58.62	1.05523	
Outpatient Facility	\$44.80	1.09552	
Professional	\$156.60	1.02463	
Prescription Drugs	\$56.01	1.05554	
Capitation and Other Provider Payments	\$1.16	1.00000	
Other	\$4.74	1.10579	
Aggregate	\$321.92	1.046550273	

Monthly Incurred Claims \$ PMPM Monthly Trend Analysis Based on Experience Data Time Period Month Member Months used for Rate Development \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 <copy formula if more months used> \$0.00 Jan-2014 Feb-2014 4,180 4,318 Mar-2014 Apr-2014 May-2014

Jun-2014 Jul-2014 Aug-2014 Sep-2014

Oct-2014 Nov-2014 Dec-2014

Dec-2014

Solvency

	Most Recent Quaterly Financial Statement	Most Recent Annual Financial Statement
Total Adjusted Capital	0	0
Authorized Control Level	0	0
RBC Ratio		

Loss Ratio

Time Period	Period Beginning Date	Period Ending Date	Member Months
Historical Year -4	1/1/2015	1/1/2015	0
Historical Year -3	1/1/2015	1/1/2015	0
Historical Year -2	1/1/2015	1/1/2015	0
Historical Year -1	1/1/2015	1/1/2015	0
Historical Year 0	1/1/2015	1/1/2015	0
Historical Totals			0

Interim Time Period	1/1/2015	1/1/2015	0
Future Year 1	1/1/2015	1/1/2015	0

Anticiptated Federal loss ratio standard in market

>80.4%

Justification for relationship of Federal MLR standard and the projected future loss ratio including detailed break down of adjustments

Based on a target admin percentage of 22.5%, which includes a 1.5% capital contribution margin, we

4,699

4,701

\$340.11

Note:

The historical time periods should represent calendar years since the inception date of the plan type through the most recent date available allowing for the appropriate amount of run-out. 🗆 In instances where the start dates and end dates do not line up with a calendar year, partial years should be used. The interim time period the time between the end date of the "Most Recent Date Available" and the rate effective date. The future year should represent the 12 months immediately following the rate effective date.

Consumer Adjusted Premium Rate Development

Index Rate for Projected Period PMPM	\$374.16
Risk Adjustment PMPM	\$0.00
Net Reinsurance Contributions PMPM	\$0.00
Exchange User Fees PMPM	\$0.00
Market Adjusted Index Rate PMPM	\$374.16

Product	Small Group HMO On Exchange	Small Group HMO On Exchange	all Group HMO On Excha
Product ID	94506DC035	94506DC035	94506DC035
Plan ID	94506DC0350001	94506DC0350002	94506DC0350021
Metal Tier	Platinum	Platinum	Gold
Metal AV Value	0.920	0.888	0.817
Pricing AV Value	0.877	0.845	0.799
Projected Member Months	10,012	10,012	2,011
Market Adjusted Index Rate PMPM	\$374.16	\$374.16	\$374.16
Plan Adjustments (in multiplicative format)			
Actuarial value and cost-sharing design of the plan	0.877	0.845	0.803
Provider network, delivery system characteristics and utilization management			
practices	1.000	1.000	1.000
Plan benefits in addition to EHB	1.017	1.017	1.017
Expected impact of special eligibility categories (only for catastrophic plans)	1.000	1.000	1.000
Plan Adjustments (in % format)			
Distribution and administration costs	22.5%	22.5%	22.5%
Plan Adjusted Index Rate	\$430.58	\$414.70	\$394.41
Age Calibration Factor	1.015	1.015	1.015
Geography Calibration Factor	1.000	1.000	1.000
Aggregate Calibration Factor	1.015	1.015	1.015
Consumer Adjusted Premium Rate PMPM	\$424.42	\$408.76	\$388.77

- 1.	A B C D	F	F	G	н	1 1	К		М	N O	Р	0	R	S	т	u l v	Х	Y
1	Unified Rate Review v2.0.4		'	, ,			, K		IVI	N O		ų.		<u> </u>		· ·	X	
2	Offined Rate Review V2.0.4																	
3	Company Legal Name:	Kaisar Founda	tion Health Plan	Stato:	DC													
4	HIOS Issuer ID:	94506	ilion nealth Piai		Small Group													
4				iviarket:	Small Group													
5	Effective Date of Rate Chan	ge(s): 1/1/2016																
6 7																		
8	Market Level Calculations (Same f	or all Plans)																
9	market zever earearations (same in	or un r luns,																
9 10 11																		
	Section I: Experience period data																	
12	Experience Period:	1/1/2014	_	12/31/2014														
13			Experience Period Aggregate Amount		% of Prem													
	Premiums (net of MLR Rebate) in	Experience Period:	\$16,976,567		100.00%													
15	Incurred Claims in Experience Peri		\$15,695,380		92.45%													
14 15 16 17 18 19	Allowed Claims:		\$17,638,014		103.90%													
17	Index Rate of Experience Period	_	54,790	\$316.58														
19	Experience Period Member Month	is	54,790															
20	Section II: Allowed Claims, PMPM	basis																
21		Experience Period Projection Period: 1/1/2016 to 12/31/2016 Mid-point to Mid-point, Experience to Projection: 24 months Adj't. from Experience to Annualized Trend															_	
						•	•											
22			on Actual Exper			Projectio	n Period	Fact	ors		before credibility	Adjustment		Credibility Manua	<u> </u>			
		Utilization	Utilization per	Average		Pop'l risk				Utilization per	Average		Utilization	Average				
23	Benefit Category Inpatient Hospital	Description Days	1,000 144.11	Cost/Service \$4,880.90	PMPM \$58.62	Morbidity 0.992	Other 1.000	1.030	Util 1.005	1,000 144.41	Cost/Service \$5,179.60	PMPM \$62.33	per 1,000 0.00	Cost/Service 0.00	PMPM \$0.00			
25	Outpatient Hospital	Services	270.93		44.80	0.992	1.000	1.029	1.025	282.39	2,101.65	49.46		0.00	0.00			
26	Professional	Visits	7,296.81		156.60	0.992	1.000	1.005	1.015	7,457.17	260.19	161.69		0.00	0.00			
27	Other Medical	Services	184.63		4.74	0.992	1.000	1.015	1.020	190.57	317.70	5.05		0.00	0.00			
28	Capitation	Other	12,000.00		1.16	1.000	1.000	1.000	1.000	12,000.00	1.16	1.16		0.00	0.00			
29	Prescription Drug	Prescriptions	5,252.27	\$127.96	56.01	0.992	1.000	1.044	1.015	5,368.19	139.51	62.41	0.00	0.00	0.00			
24 25 26 27 28 29 30 31	Total				\$321.92							\$342.09			\$0.00	After Credibility	Projected Period	d Totals
31	Section III: Projected Experience:				Projected Allowed	l Evnarianca Clain	o DNADNA (uu/o	undied eredi	hility if applic	able)		100.00%			0.00%	\$342.09		267,308
33	section III: Projected Experience:				Projecteu Alloweu	Paid to Allow				.aule)		100.00%			0.00%	0.900		207,306
34						Projected Inc	-			li't. PMPM						\$307.78		933,783
35						Projected Risl										-0.19		(12,964)
36						Projected I	ncurred Claim	ıs, before rei	nsurance rec	overies, net of rein p	rem, PMPM					\$307.97	\$20,9	946,747
37						Projected ACA	A reinsurance	recoveries, r	net of rein pre	em, PMPM						-2.25	(153,036)
38					Projected Incurred	d Claims										\$310.22	\$21,0	099,783
40					Administrative Exp	ense Load									18.13%	72.59	4,9	937,214
41					Profit & Risk Load										1.50%	6.01		408,441
42					Taxes & Fees										2.88%	11.53		783,939
43					Single Risk Pool Gr		. Rate, PMPM									\$400.34		229,377
44					Index Rate for Pro	jection Period % increase ov	or Evnorionss	Pariod								\$340.95 29.20%		
33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48						% Increase ov % Increase, ar		reliou								13.67%		
47					Projected Membe											23.0770		68,016
48					-													
1																		
	Information Not Releasable											ust not be						
49	dissen	ninated, distributed, or cop	ied to persons not au	thorized to recei	ve the information	n. Unauthorized o	lisclosure may	result in pro	secution to t	the full extent of the	law.							
50																		

Product-Plan Data Collection

Company Legal Name: HIOS Issuer ID: Effective Date of Rate Change(s):

Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. 94506 1/1/2016

State: DC Market: Small Group

roduct/Plan Level Calculations

Section I: General Product and Plan Information																					
Product							Smal	II Group HMO On Exc	hange							Smal	Group POS On Excl	hange			Small Group HMO C
Product ID:								94506DC035									94506DC036				94506
Metal:	Platinum	Platinum	Gold	Gold	Gold	Gold	Gold	Silver	Silver	Silver	Silver	Bronze	Bronze	Bronze	Bronze	Bronze	Silver	Gold	Platinum	Platinum	Gold
AV Metal Value	0.920	0.888	0.817	0.819	0.796	0.816	0.784	0.714	0.703	0.716	0.687	0.620	0.609	0.619	0.617	0.620	0.703	0.796	0.920	0.888	0.819
AV Pricing Value	0.877	0.845	0.799	0.803	0.732	0.719	0.686	0.663	0.624	0.623	0.579	0.515	0.475	0.484	0.482	0.581	0.703	0.849	0.921	0.887	0.843
Plan Type:	HMO	HMO	HMO	HMO	HMO	HMO	HMO	HMO	POS	POS	POS	HMO	HMO	HMO							
	KP DC Platinum	KP DC Platinum	KP DC Gold	KP DC Silver	KP DC Silver	KP DC Silver	KP DC Silver	KP DC Bronze	KP DC Bronze	KP DC Bronze	KP DC Bronze	KP DC Bronze	KP DC Silver	KP DC Gold	KP DC Platinum	KP DC Platinum	KP DC Gold				
Plan Name														5000/20/HSA/Den	4500/50/POS/Den	2000/35/POS/Den	1000/30/POS/Den	0/20/Dental/Ped	500/20/Dental/Pe	0/20/Dental/Ped	
	Dental	d Dental	d Dental	Dental	ed Dental	tal/Ped Dental	tal/Ped Dental	ed Dental	ed Dental	tal/Ped Dental	/Dental/Ped	ed Dental	/Dental/Ped	ntal/Ped Dental	tal/Ped Dental	tal/Ped Dental	tal/Ped Dental	tal/Ped Dental	Dental/Sel	d Dental/Sel	Dental/Sel
Plan ID (Standard Component ID):	94506DC0350001	94506DC0350002	94506DC0350021	94506DC0350004	94506DC0350005	94506DC0350006	94506DC0350007	94506DC0350008	94506DC0350009	94506DC0350010	94506DC0350011	94506DC0350012	94506DC0350015	94506DC0350013	94506DC0350014	94506DC0360001	94506DC0360002	94506DC0360003	94506DC0350016	94506DC0350017	94506DC0350018
Exchange Plan?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes							
Historical Rate Increase - Calendar Year - 2								0.00%									0.00%				0.0
Historical Rate Increase - Calendar Year - 1								0.00%									0.00%				0.0
Historical Rate Increase - Calendar Year 0								0.00%									0.00%				0.0
Effective Date of Proposed Rates	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016	1/1/2016
Rate Change % (over prior filing)	2.31%	3.40%	2.79%	0.84%	3.17%	1.14%	-3.66%	3.36%	3.46%	4.15%	-6.44%	5.75%	-6.40%	-1.81%	4.85%	7.14%	2.12%	3.24%	2.31%	3.40%	0.84%
Cum'tive Rate Change % (over 12 mos prior)	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Proj'd Per Rate Change % (over Exper. Period)	-3.59%	-2.56%	-3.14%	-4.98%	-2.78%	-4.69%	-9.22%	-2.60%	-2.51%	-1.85%	-11.84%	-0.35%	-11.80%	-7.47%	-1.20%	0.96%	-3.77%	-2.71%	-3.59%	-2.56%	-4.98%
Product Threshold Rate Increase %								0.00%									0.00%				0.0

Section II: Components of Premium Increase (PMPM Dollar Amount above Current Average Rate PMPM)

Plan ID (Standard Component ID):	Total	94506DC0350001	94506DC0350002	94506DC0350021	94506DC0350004	94506DC0350005	94506DC0350006	94506DC0350007	94506DC0350008	94506DC0350009	94506DC0350010	94506DC0350011	94506DC0350012	94506DC0350015	94506DC0350013	94506DC0350014	94506DC0360001 9	94506DC0360002	94506DC0360003	94506DC0350016	94506DC0350017 9	94506DC0350018
Inpatient	-\$2.37	-\$9.72	-\$8.48	-\$8.48	-\$10.06	-\$7.51	-\$8.79	-\$11.81	-\$6.69	-\$6.23	-\$5.82	-\$11.77	-\$4.05	-\$9.63	-\$7.37	-\$4.19	-\$3.85	-\$7.92	-\$8.66	-\$10.20	-\$8.90	-\$10.56
Outpatient	-\$1.20	-\$4.90	-\$4.05	-\$4.19	-\$5.37	-\$3.64	-\$4.65	-\$7.03	-\$3.21	-\$2.97	-\$2.66	-\$7.31	-\$1.62	-\$5.98	-\$4.23	-\$1.82	-\$1.28	-\$4.03	-\$4.17	-\$5.15	-\$4.26	-\$5.64
Professional	-\$0.29	-\$1.13	\$0.95	-\$0.17	-\$3.71	\$0.46	-\$2.83	-\$10.61	\$0.68	\$0.78	\$1.72	-\$13.13	\$3.17	-\$10.72	-\$5.26	\$2.05	\$5.24	-\$1.20	\$0.66	-\$1.19	\$1.00	-\$3.90
Prescription Drug	\$3.07	\$12.65	\$12.84	\$11.80	\$10.73	\$11.02	\$9.76	\$6.78	\$10.06	\$9.50	\$9.80	\$4.38	\$8.65	\$3.61	\$5.49	\$7.82	\$10.31	\$10.05	\$12.82	\$13.28	\$13.48	\$11.26
Other	\$0.94	\$3.87	\$3.75	\$3.53	\$3.51	\$3.25	\$3.15	\$2.91	\$2.95	\$2.77	\$2.78	\$2.41	\$2.32	\$1.98	\$2.08	\$2.16	\$2.64	\$3.10	\$3.77	\$4.06	\$3.94	\$3.69
Capitation	\$0.04	\$0.15	\$0.15	\$0.14	\$0.12	\$0.13	\$0.11	\$0.05	\$0.12	\$0.11	\$0.12	\$0.02	\$0.11	\$0.01	\$0.05	\$0.10	\$0.14	\$0.12	\$0.15	\$0.15	\$0.16	\$0.12
Administration	\$1.72	\$7.10	\$6.83	\$6.46	\$6.50	\$5.93	\$5.82	\$5.55	\$5.37	\$5.05	\$5.04	\$4.69	\$4.16	\$3.84	\$3.92	\$3.90	\$4.70	\$5.69	\$6.87	\$7.45	\$7.18	\$6.82
Taxes & Fees	\$0.27	\$1.13	\$1.09	\$1.03	\$1.03	\$0.94	\$0.92	\$0.88	\$0.85	\$0.80	\$0.80	\$0.74	\$0.66	\$0.61	\$0.62	\$0.62	\$0.75	\$0.90	\$1.09	\$1.18	\$1.14	\$1.08
Risk & Profit Charge	\$0.14	\$0.59	\$0.57	\$0.53	\$0.54	\$0.49	\$0.48	\$0.46	\$0.44	\$0.42	\$0.42	\$0.39	\$0.34	\$0.32	\$0.32	\$0.32	\$0.39	\$0.47	\$0.57	\$0.62	\$0.59	\$0.56
Total Rate Increase	\$2.33	\$9.72	\$13.64	\$10.65	\$3.29	\$11.06	\$3.98	-\$12.81	\$10.58	\$10.24	\$12.20	-\$19.58	\$13.74	-\$15.96	-\$4.38	\$10.95	\$19.02	\$7.17	\$13.11	\$10.21	\$14.33	\$3.45
Member Cost Share Increase	\$0.92	\$2.63	-\$0.78	\$1.51	\$5.37	\$0.64	\$4.33	\$14.75	\$7.16	\$8.06	\$5.44	\$30.13	\$11.82	\$23.21	\$20.39	\$9.51	-\$0.87	\$8.81	\$0.28	\$2.76	-\$0.82	\$5.63
Average Current Rate PMPM	\$390.78	\$420.85	\$401.05	\$381.54	\$391.13	\$348.61	\$349.09	\$349.80	\$315.21	\$296.01	\$293.95	\$303.99	\$238.97	\$249.29	\$241.97	\$225.96	\$266.37	\$338.03	\$403.98	\$441.90	\$421.10	\$410.68
Projected Member Months	68,016	10,012	10,012	2,011	2,011	2,011	2,011	2,011	652	652	652	652	920	920	920	920	920	652	2,011	10,011	10,011	2,011

:tion III: Experience Period Information

Plan ID (Standard Component ID):	Total	94506DC0350001	94506DC0350002	94506DC0350021	94506DC0350004	94506DC0350005	94506DC0350006	94506DC0350007	94506DC0350008	94506DC0350009	94506DC0350010	94506DC0350011	94506DC0350012	94506DC0350015	94506DC0350013	94506DC0350014	94506DC0360001	94506DC0360002	94506DC0360003	94506DC0350016	94506DC0350017 9-	4506DC0350018
Plan Adjusted Index Rate	\$309.85	\$446.61	\$425.60	\$404.89	\$415.07	\$369.95	\$370.46	\$371.21	\$334.50	\$314.13	\$311.94	\$322.59	\$253.60	\$264.55	\$256.77	\$239.79	\$282.67	\$358.72	\$428.71	\$468.94	\$446.88	\$435.82
Member Months	54,790	2,554	1,993	22	1,502	562	233	22	347	235	27	57	104	77	388	380	10	14	597	3,593	207	778
Total Premium (TP)	\$16,976,567	\$1,140,641	\$848,213	\$8,907	\$623,429	\$207,909	\$86,317	\$8,167	\$116,072	\$73,821	\$8,422	\$18,388	\$26,374	\$20,370	\$99,629	\$91,120	\$2,827	\$5,022	\$255,939	\$1,684,903	\$92,503	\$339,067
EHB Percent of TP, [see instructions]	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%
state mandated benefits portion of TP that are other																						
than EHB	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Other benefits portion of TP	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%
Total Allowed Claims (TAC)	\$17,638,014	\$974,500	\$777,281	\$8,419	\$556,968	\$209,700	\$87,203	\$8,257	\$126,404	\$84,280	\$9,548	\$20,307	\$34,436	\$26,080	\$129,861	\$123,329	\$3,365	\$5,040	\$225,789	\$1,439,486	\$84,768	\$302,921
EHB Percent of TAC, [see instructions]	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%	98.75%
state mandated benefits portion of TAC that are other																						
than EHB	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Other benefits portion of TAC	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%	1.25%
Allowed Claims which are not the issuer's obligation:	\$1.942.634	\$68.153	\$104.300	\$1.363	\$62,730	\$45,529	\$19.042	\$1.808	\$35.106	\$26.368	\$2,943	\$5.866	\$13.960	\$10,230	\$52,461	\$52.808	\$1.158	\$1.079	\$22,678	\$98.751	\$11.264	\$33,701
Portion of above payable by HHS's funds on																						
behalf of insured person, in dollars	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Portion of above payable by HHS on behalf																						
of insured person, as % Total Incurred claims, payable with issuer funds	0.00%	0.00%	0.00% \$672.981	0.00% \$7.056	0.00%	0.00% \$164.171	0.00% \$68.162	0.00%	0.00% \$91.298	0.00% \$57.912	0.00%	0.00% \$14.442	0.00% \$20.476	0.00% \$15.850	0.00%	0.00% \$70.521	0.00% \$2.207	0.00% \$3.961	0.00% \$203.111	0.00% \$1.340.734	0.00% \$73.504	0.00% \$269.220
Total incurred claims, payable with issuer funds	\$15,095,380	\$900,340	\$672,981	\$7,056	\$494,238	\$104,1/1	\$08,102	\$6,449	591,298	\$57,912	\$6,605	\$14,442	\$20,476	\$15,850	\$77,400	\$70,521	\$2,207	\$3,901	\$203,111	\$1,340,734	\$73,504	\$209,220
Net Amt of Rein	-\$52 033 26	-\$9.373.18	-\$7.314.31	-\$80.74	-\$5.512.34	-\$2.062.54	-\$855.11	-\$80.74	-\$1.273.49	-\$862.45	-\$99.09	-S209.19	-\$381.68	-\$282.59	-\$1,423,96	-\$1.394.60	-\$36.70	-\$51.38	-\$2,190,99	-\$13.186.31	-\$759.69	-\$2.855.26
Net Amt of Risk Adi	\$203,708.56	\$36,695,70	\$28,635,29	\$316.09	\$21 580 64	\$8,074,78	\$3.347.73	\$316.09		\$3,376,46	\$387.93	\$818.97	\$1,494.27	\$1 106 33	\$5,574,76	\$5,459.81	\$143.68	\$201.15	\$8 577 66	\$51,623,98	\$2,974.16	\$11,178.25
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			722,000.0	40,000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Incurred Claims PMPM	\$286.46	\$354.87	\$337.67	\$320.72	\$329.05	\$292.12	\$292.54	\$293.15		\$246.43	\$244.64	\$253.36	\$196.89	\$205.85	\$199.48	\$185.58	\$220.68	\$282.93	\$340.22		\$355.09	\$346.04 \$389.36
Allowed Claims PMPM	\$321.92	\$381.56	\$390.01	\$382.68	\$370.82	\$373.13	\$374.26	\$375.34	\$364.28	\$358.64	\$353.64	\$356.27	\$331.12	\$338.70	\$334.69	\$324.55	\$336.50	\$360.00	\$378.21	\$400.64	\$409.51	\$389.36
EHB portion of Allowed Claims, PMPM	\$317.91	\$376.80	\$385.15	\$377.92	\$366.20	\$368.48	\$369.60	\$370.66	\$359.74	\$354.17	\$349.23	\$351.83	\$326.99	\$334.48	\$330.52	\$320.51	\$332.31	\$355.52	\$373.49	\$395.64	\$404.40	\$384.51

:tion IV: Projected (12 months following effective date)

Plan Adjusted Index Rate		94506DC0350001	94506DC0350002	94506DC0350021		94506DC0350005	94506DC0350006	94506DC0350007	94506DC0350008	94506DC0350009	94506DC0350010	94506DC0350011	94506DC0350012	94506DC0350015	94506DC0350013	94506DC0350014	94506DC0360001	94506DC0360002	94506DC0360003	94506DC0350016	94506DC0350017	94506DC035001
	\$400.11	\$430.58	\$414.70	\$392.18	\$394.41	\$359.67	\$353.08	\$336.99	\$325.79	\$306.25	\$306.15	\$284.41	\$252.72	\$233.33	\$237.59	\$236.91	\$285.39	\$345.21	\$417.09	\$452.10	\$435.43	\$414.1
Member Months	68,016	10,012	10,012	2,011	2,011	2,011	2,011	2,011	652	652	652	652	920	920	920	920	920	652	2,011	10,011	10,011	2,011
Total Premium (TP)	\$27,214,012	\$4,310,918	\$4,151,929	\$788,681	\$793,165	\$723,303	\$710,035	\$677,689	\$212,417	\$199,678	\$199,610	\$185,433	\$232,500	\$214,665	\$218,580	\$217,959	\$262,557	\$225,075	\$838,770	\$4,526,012	\$4,359,090	\$832,82
EHB Percent of TP, [see instructions]	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.349
state mandated benefits portion of TP that are other																						
than EHB	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.009
Other benefits portion of TP	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.669
Total Allowed Claims (TAC)	\$23,268,542	\$3,382,145	\$3,458,527	\$682,243	\$656,405	\$665,976	\$662,285	\$653,137	\$215,406	\$212,917	\$209,724	\$204,784	\$287,229	\$270,504	\$277,425	\$277,397	\$283,956	\$211,483	\$674,755	\$3,550,897	\$3,631,091	\$689,220
EHB Percent of TAC, [see instructions]	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.34%	98.349
state mandated benefits portion of TAC that are other																						
than EHB	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.009
Other benefits portion of TAC	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.66%	1.669
Allowed Claims which are not the issuer's obligation	\$2,167,649	\$41,454	\$240,142	\$70,627	\$41,340	\$104,653	\$111,169	\$126,904	\$50,409	\$57,720	\$54,580	\$60,545	\$106,129	\$103,124	\$107,034	\$107,482	\$79,733	\$36,748	\$24,607	\$44,744	\$253,346	\$43,65
Portion of above payable by HHS's funds on																						
behalf of insured person, in dollars	\$0																					
Portion of above payable by HHS on behalf										l									l			
of insured person, as %	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.009

Net Amt of Rein	-\$153,036	-\$22,527	-\$22,527	-\$4,525	-\$4,525	-\$4,525	-\$4,525	-\$4,525	-\$1,467	-\$1,467	-\$1,467	-\$1,467	-\$2,070	-\$2,070	-\$2,070	-\$2,070	-\$2,070	-\$1,467	-\$4,525	-\$22,525	-\$22,525	-\$4,525
Net Amt of Risk Adj	-\$12,964	-\$1,908	-\$1,908	-\$383	-\$383	-\$383	-\$383	-\$383	-\$124	-\$124	-\$124	-\$124	-\$175	-\$175	-\$175	-\$175	-\$175	-\$124	-\$383	-\$1,908	-\$1,908	-\$383